

THE COUNTESS OF DUFFERIN'S FUND,

TWENTY-FIFTH ANNUAL REPORT

OF THE

NATIONAL ASSOCIATION FOR SUPPLYING FEMALE
MEDICAL AID TO THE WOMEN OF INDIA

FOR THE YEAR 1909.

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NATIONAL ASSOCIATION FOR SUPPLYING FEMALE
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FOR THE YEAR 1909.



CALCUTTA
SUPERINTENDENT GOVERNMENT PRINTING, INDIA

1910

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in Council, being an Act for the Registration of Literary, Scientific and
Charitable Societies*

AND

*In the matter of "The National Association for Supplying Female Medical Aid to the
Women of India."*

Memorandum of Association.

1. The name of the Association is "The National Association for Supplying Female Medical Aid to the Women of India."

2. The objects for which the Association is established are—

(1) *Medical tuition*, including the teaching and training in India of women as doctors, hospital assistants, nurses and midwives.

(2) *Medical relief*, including—

(a) the establishment under female superintendence of dispensaries and cottage hospitals for the treatment of women and children,

(b) the opening of female wards under female superintendence in existing hospitals and dispensaries;

(c) the provision of female medical officers and attendants for existing female wards;

(d) the founding of hospitals for women where special funds or endowments are forthcoming.

(3) The supply of trained female nurses and midwives for women and children in hospitals and private houses.

(4) The management of the Fund raised for the above objects, and which is known as "The Countess of Dufferin's Fund."

(5) The purchase or acquisition on lease, or in exchange, or on hire or otherwise, of any real or personal property, and any rights or privileges necessary or convenient for the purposes of the Association.

(6) The erection, construction, alteration, and maintenance of any buildings necessary or convenient for the purposes of the Association.

(7) The sale, improvement, management and development of all or any part of the property of the Association.

(8) The promotion and establishment of Branches and of other Societies or Associations with similar objects, and the affiliation or amalgamation of such Societies or Associations with this Association.

(9) The doing of all such things as are incidental or conducive to the attainment of the above objects or any of them.

3. The names, addresses and occupations of the persons who are members of and form the Central Committee or governing body of the said Association are as follows:—

1st.—Her Excellency the Right Honourable the Countess of Dufferin and Ava, c.t., Lady President, whose address is—Viceroy's Camp, India.

2nd.—The Hon'ble Mr. A. R. Scoble, a.c., Member of the Viceroy's Council.

3rd.—The Hon'ble Sir Charles Aitchison, k.c.s.i., Member of the Viceroy's Council.

4th.—The Hon'ble Sir Dinshaw Maneckjee Petit, Kt., of Bombay, Additional Member of the Viceroy's Council.

5th.—A. P. MacDonnell, Esq., C.S., Secretary to the Government of India in the Home Department.

6th.—The Hon'ble Mr. C. H. Moore (Messrs. Gillanders, Arbuthnot & Co.), Calcutta, Member of the Council of His Honour the Lieutenant-Governor of Bengal.

7th.—The Hon'ble Sir Syed Ahmed Khan, Bahadur, K.C.S.I., of Aligarh, Member of the Council of His Honour the Lieutenant-Governor of the North-West Provinces.

8th.—Surgeon-General Sir Benjamin Simpson, M.D., K.C.I.E., Sanitary Commissioner with the Government of India.

9th.—Maharaja Sir Jotendra Mohun Tagore, Bahadur, K.C.S.I., Calcutta.

10th.—Sir Alexander Wilson, Kt. (Messrs. Jardine, Skinner & Co.), Calcutta, President, Bank of Bengal.

4. A copy of the Rules and Regulations of the said National Association is filed with this Memorandum of Association, and the undersigned, being seven of the members of the governing body of the said National Association, do hereby certify that such copy of such Rules and Regulations is a correct copy of the Rules and Regulations of the said National Association.

As witness our several and respective hands and signatures this 29th day of February 1888.

WITNESS.

HARRY COOPER, Major,

Loyal North Lancashire Regiment.

SIGNATURES.

HARRIOT DUFFERIN,

ANDREW R. SCOBLE.

C. U. AITCHISON.

JOTENDRA MOHUN TAGORE.

B. SIMPSON.

DINSHAW MANECKJEE PETIT.

CHARLES H. MOORE.

Rules and Regulations of the National Association for Supplying Female Medical Aid to the Women of India.

The Lady President.

1. The first Lady President of the National Association is Her Excellency the Right Honourable the Countess of Dufferin, C.I. On her vacating this office the power of filling the vacancy shall rest with the Central Committee.

Members.

2. The Members of the National Association shall consist of three classes, namely:—

A—Life Councillors, B—Life Members, and C—Ordinary Members.

Life Councillors.

3. Every donor of £500 or ₹5,000, or of subscriptions which in the aggregate amount to £500 or ₹5,000, and upwards, to the funds of the National Association, shall be a Life Councillor.

Life Members.

4. Every donor of £50 or ₹500, or of subscriptions which in the aggregate amount to £50 or ₹500, and upwards, to the funds of the National Association, shall be a Life Member.

Ordinary Members.

5. Every subscriber of not less than 10s. or ₹5 annually to the funds of the National Association shall, during the currency of his subscription, be an Ordinary Member of the Association. An Ordinary Member shall pay an entrance fee of £1 or ₹10. If he does not

pay his entrance fee separately, the first £1 or R10 subscribed by him shall be treated as his entrance fee.

Rights and Privileges of Members.

6. Every member of the National Association shall be entitled to attend at, and take part in, the meetings of the Association, and, on application, to receive copies of the reports and other publications from time to time issued by the Association. Life Councillors and Life Members shall have such additional rights and privileges as may from time to time be determined by the Central Committee.

Affairs to be managed by Central Committee.

7. The general management of the affairs of the National Association shall rest with a Central Committee, who, for the purposes of Act XXI of 1860, shall be taken to be, and shall act as, the governing body of the Association.

Constitution of the Central Committee.

8. The first members of the Central Committee shall be the Lady President of the National Association, and the following gentlemen, namely:—

The Hon'ble Mr. A. R. SCOBLE, Q. C., <i>Member of the Viceroy's Council.</i>	Maharaja Sir JOTENDRA MOHUN TAGORE, Bahadur, K. C. S. I.
The Hon'ble Sir CHARLES AITCHISON, K. C. S. I., <i>Member of the Viceroy's Council.</i>	The Hon'ble Sir SYED AHMED KHAN, Bahadur, of Aligarh, K. C. S. I.
A. P. MACDONNELL, Esq., <i>Secretary to the Govt. of India, Home Department</i>	The Hon'ble Mr. C. H. MOORE (Messrs. Gillanders, Arbuthnot & Co.).
Surgo.-Genl. Sir BENJAMIN SIMPSON, M. D., K. C. I. E., <i>Sanitary Commissioner with the Govt. of India.</i>	Sir ALEXANDER WILSON, Kt. (Messrs. Jardine, Skinner & Co.), <i>President, Bank of Bengal.</i>
The Hon'ble Sir DINSHAW MANECKJEE PETIT, Kt., of Bombay, <i>Additional Member of the Viceroy's Council.</i>	

9. The Lady President of the National Association for the time being shall be, by virtue of her office, President of the Central Committee, and shall have the power of filling vacancies in, and making additional appointments to, that Committee.

Powers of Central Committee.

10. The Central Committee shall have power—

- to apply "The Countess of Dufferin's Fund" to such purposes as they may consider conducive to the objects of the National Association;
- to invest from time to time, in or upon the securities hereinafter mentioned, such money credited to "The Countess of Dufferin's Fund" as may not be required for the purposes of the National Association, and to vary and realize investments;
- to make and vary such regulations not inconsistent with the Memorandum of Association and these Rules as may be necessary or expedient for the conduct of the business of the National Association, and to fix from time to time the quorum necessary for the transaction of business, but, until they shall otherwise determine, four members of the Central Committee shall form a quorum; and
- generally to do such things as they may consider necessary or expedient for the purpose of carrying out the objects of the National Association.

Duties of Central Committee.

11. The Central Committee shall directly control local operations for the objects of the National Association in those parts of the country where a Branch Association, such as is hereinafter referred to, does not exist. It shall specially endeavour to assist any Ruling Chiefs who may desire to organize similar operations within their own territories, and who may seek the advice or aid of the National Association. It shall publish periodical

statements of the accounts and the reports of the work done by the National Association, by the Branch Associations aforesaid, and by Societies affiliated to the National Association.

Officers.

12. The Central Committee shall have power to appoint from time to time an Honorary Secretary and other officers of the National Association, and to delegate to such officers such of their powers as they may consider expedient. The first Honorary Secretary shall be Major Harry Cooper, A.-D.-C.

Funds.

13. All moneys subscribed to the support of the objects of the Association shall constitute "The Countess of Dufferin's Fund." The funds under the control of the Executive Committees of the several Branches shall be designated "[.....] Branch of the Countess of Dufferin's Fund." All moneys paid to the Honorary Secretaries of Branches will be credited to the fund at command of the particular Branch to the Honorary Secretary of which the same has been paid, unless specially designated for the Central Committee.

Investments.

14. Any moneys which, in the opinion of the Central Committee, it shall be from time to time necessary or expedient to invest shall be invested in the joint names of not less than two of the members of such Central Committee, as Trustees for the Association, in some or one of the following securities, but in no others, that is to say:—

- (i) In promissory notes, debentures, stock and other securities of the Government of India, or of the United Kingdom of Great Britain and Ireland.
- (ii) In bonds, debentures and annuities charged by the Imperial Parliament on the revenues of India.
- (iii) In stock or debentures of, or shares in, railway or other companies, the interest whereon shall have been guaranteed by the Secretary of State for India.
- (iv) In debentures or other securities for money issued by, or on behalf of, any Municipal body under the authority of any Act of a Legislature established in British India, or in debentures or other securities issued by, or on behalf of the Commissioners of the Port of Calcutta, the Trustees of the Port of Bombay, the Trustees of the Harbour of Madras, the Trustees of the Port of Karachi, or the Commissioners of the Port of Rangoon, or by, or on behalf of, any other local authority under the authority of any Act of a Legislature established in British India.
- (v) On mortgage of moveable and immovable property under the management of the Court of Wards.
- (vi) In any investments not hereinbefore specified, authorized for the investment of trust funds by the Indian Trusts Act, 1882 (Act II of 1882), or any re-enactment or statutory modification thereof.

General Meetings.

15. A General Meeting of the National Association shall be held once in every year at Calcutta during the cold season, at such time and place as the Central Committee may appoint, provided that at least seven days' notice of the time and place so appointed be given by advertisement as hereinafter provided. At this meeting the Central Committee shall present a report, showing the proceedings and progress of the Association during the past year and its financial position.

Special Meetings.

16. The Central Committee may at any time, and shall, upon a written requisition by not less than ten Life Councillors or Life Members in that behalf, call a Special Meeting of the Association. Notice of such meeting shall be given as provided in Rule 15. and such notice shall state the purpose for which such Special Meeting is to be called.

Notices.

17. Any notice required to be or which may be given by advertisement shall be advertised in such newspapers as the Central Committee may from time to time direct in that behalf.

Branch Associations.

18. Each Branch Association will have the independent management of its own affairs and funds (which funds shall include all sums paid to the Association and specially designated for such Branch and all sums paid to the Honorary Secretary of such Branch and not specially designated for the Central Committee), and the Committee for the time being of each Branch shall accordingly in respect of the funds of such Branch have and be subject to the like powers and duties as to investment of moneys as those conferred and imposed upon the Central Committee by Rule 10 (b) and Rule 14, respectively, and such Branch Committee in lieu of the Central Committee may and shall accordingly exercise and perform such powers and duties in respect of any moneys forming part of such Branch funds which in the opinion of such Branch Committee it shall be necessary or expedient to invest by investing the same in the joint names of not less than two members of such Branch Committee as Trustees for its Branch in some or one of the securities or investments mentioned in Rule 14, but in no others. The Managing Committee of each Branch will be expected to act as the local agents and representatives of the Central Committee and to contribute from the Branch funds to the Central Committee such amount as may from time to time be arranged between the Central Committee and the Committee of the Branch concerned.

Affiliated Societies.

19. Any Society established for objects similar to those of the National Association may, with the permission of the Central Committee, affiliate itself to the National Association. An affiliated Society shall, unless if otherwise desired, remain independent in the administration of its funds and the conduct of its operations, but will be requested to furnish to the Central Committee such reports and information as may be mutually agreed on, and to assist by correspondence and conference in the furtherance of their common objects. On the other hand, the Central Committee shall have power to assist affiliated Societies in such manner and to such extent as may be considered by them consistent with the rules and conducive to the special objects of the National Association.

Co-operation with Medical Officers of Government.

20. All persons employed by the Association will be required, as a condition of their employment, to act in harmony with, and, where necessary, in subordination to, the Medical Officers of the Government.

Bankers.

21. The Bankers of the National Association shall, until it is otherwise arranged by the Central Committee, be the Bank of Bengal in India, and Messrs. Coutts & Co. in England.

22. No alteration shall be made in the above Rules and Regulations, except by the vote of a majority of the members present at a Special Meeting called for that purpose as hereinafter provided.

WITNESS.

HARRY COOPER, *Major,*
Loyal North Lancashire Regiment.

SIGNATURES

HARRIOT DUFFERIN.
ANDREW R. SCOBLE.
C. U. AITCHISON.
JOTENDRA MOHUN TAGORE.
B. SIMPSON.
DINSHAW MANECKJEE PETIT.
CHARLES H. MOORE.

NOTE.—Rules 14 and 18 were amended as above at a General Meeting of the Association held at Government House, Calcutta, on the 14th February 1908.

Patron.

HER MOST GRACIOUS MAJESTY QUEEN ALEXANDRA.

Patron in India.

HIS EXCELLENCY THE RIGHT HON'BLE THE EARL OF MINTO, P.C., G.M.S.I., G.C.M.G., G.M.I.E.
ETC., VICEROY AND GOVERNOR-GENERAL OF INDIA.

Lady President.

HER EXCELLENCY THE COUNTESS OF MINTO, C. I.

Vice-Patrons.

H. R. H. THE PRINCE OF WALES, K.G., K.T., K.F.

H. R. H. Field Marshal THE DUKE OF CONNAUGHT AND STRATHEARN, K.G., K.T., K.F., G.C.S.I.

The Most Hon. the MARQUESS OF LANSDOWNE,
K.G., G.C.S.I., G.C.I.E.

The Right Hon. the EARL OF ELGIN AND KINCARDINE, K.G., G.C.S.I., G.C.I.E.

The Right Hon. Lord REAY, G.C.I.E.

The Lord CURZON, P.C., G.C.S.I., G.C.I.E.

Sir STEUART BAYLEY, K.C.S.I.

Sir AUCKLAND COLVIN, K.C.M.G.

H. H. the NIZAM OF HYDERABAD, G.C.B., G.C.S.I.

H. H. the GARKWAR OF BARODA, G.C.S.I.

H. H. the MAHARAJA OF JODHPUR, G.C.S.I.

H. H. the MAHARAJA OF UDAIPUR, G.C.S.I.

H. H. the MAHARAJA SCINDIA OF GWALIOR, G.C.S.I.

The Right Hon. Lord HARRIS, G.C.I.E.

The Right Hon. Lord WENLOCK, G.C.I.E.

Sir JAMES LYALL, K.C.S.I.

The Most Hon. the MARQUESS OF RIFON, K.G.

Sir ALFRED LYALL, K.C.B.

Sir CHARLES ELLIOTT, K.C.S.I.

H. H. the MAHARAJA OF TRAVANCORE, G.C.S.I.

H. H. the MAHARAJA OF JAIPUR, G.C.S.I.

The Hon. the MAHARAJA OF VIZIANAGRAM, K.C.I.E.

H. H. the MAHARAJA OF KASHMIR, G.C.S.I.

The MAHARAJA OF DARBHANGA, K.C.I.E.

H. H. the MAHARAJA OF BENARES, K.C.I.E.

Vice-Patronesses.

H. R. H. THE PRINCESS OF WALES, C.I.

H. R. H. THE DUCHESS OF CONNAUGHT AND STRATHEARN, C.I.

The Most Hon. the DOWAGER MARCHIONESS OF
DUFFERIN AND AVA, V. & A., C.I.The Most Hon. the MARCHIONESS OF LANSDOWNE,
C.I.

The Lady REAY, C.I.

The Right Hon. the COUNTESS OF LYTTON, C.I.

The Lady RANDOLPH CHURCHILL, C.I.

H. H. the MAHARANI OF JODHPUR.

The Lady WENLOCK, C.I.

Lady BAYLEY.

Lady LYALL.

Lady ELLIOTT.

H. H. the NAWAB BEGUM OF BHOPAL.

H. H. MAHARANI KEMPANANJAMMANI VANIVILAS SANNIDHANNA, of Mysore, C.I.

H. H. the NAWAB KHYRUN-NISA BEGUM of the
CARNATIC.

Lady JAMES LYALL.

The Most Hon. the MARCHIONESS OF RIFON, C.I.

The Lady EMMA BARING, C.I.

Lady GRANT DUFF, C.I.

Lady AITCHISON.

Her Highness the NAWAB SHAMS-I-JAHAN BEGUM
SAHIBA, C.I., of MURSHIDABAD.

The Lady AMPHILL, C.I.

The Lady NORTHCOTE, C.I.

H. H. the MAHARANI CHINKU RAJA SAHIBA of
GWALIOR.H. H. the MAHARANI SAKHUJA RAJA SAHIBA
SINDHIA ALIJA BAHADUR, C.I., of GWALIOR.

H. H. the MAHARANI of HUTWA.

And such other persons of position and influence, both English and Indian, as may from time to time be specially invited by the Central Committee to become Vice-Patrons and Vice-Patronesses of the Association,

CENTRAL COMMITTEE.

Lady President.

HER EXCELLENCY THE COUNTESS OF MINTO.

Members.

- | | |
|--|---|
| <p>The Hon'ble Mr. J. O. MILLER, C.S.I., I.C.S.,
<i>Member of the Viceroy's Council.</i></p> <p>The Hon'ble Mr. S. P. Sinha, <i>Member of the Viceroy's Council.</i></p> <p>Sir H. H. RISLEY, K.C.I.E., C.S.I., <i>Member of the Viceroy's Council.</i></p> <p>Lt.-Col. C. P. LUKIS, M.D., F.R.C.S., <i>Offg. Director-General, Indian Medical Service.</i></p> <p>S. H. BUTLER, Esq., C.S.I., C.I.E., I.C.S., <i>Secretary to the Govt. of India, Foreign Dept.</i></p> <p>The Hon'ble Mr. G. R. M. CHITNAVIS, C.I.E.,
Central Provinces.</p> | <p>The Hon'ble Nawab MUMTAZ-UD-DAULA, Sir
MUH'D FAIYAZ ALI KHAN, K.C.I.E., C.S.I.,
United Provinces.</p> <p>The Hon'ble Maharaja Dhiraj Sir BIJAY CHAND
MAHTAB BAHADUR, of Burdwan, K.C.I.E.,
Bengal.</p> <p>Raja Sir HARNAM SINGH, K.C.I.E., Ahluwalia, of
Kapurthala, Punjab.</p> |
|--|---|

Honorary Secretary.

Surgeon Lieut.-Colonel W. R. CROOKE-LAWLESS, C.I.S., Coldstream Guards, Viceroy's Camp.

Joint Secretary.

E. J. BUCK, Esq., Viceroy's Camp.

Assistant Secretary.

W. G. A. HANRAHAN, Esq., Viceroy's Camp.

Honorary Treasurer.

Colonel B. W. MARLOW, Military Accountant-General.

Auditor.

O. T. BARROW, Esq., C.S.I., I.C.S., Comptroller and Auditor-General.

Honorary Solicitors.

Messrs. SANDERSON & Co., Calcutta.

Bankers.

BANK OF BENGAL, Calcutta.
Messrs. COUTTS & Co., 59, Strand, London.

Honorary Secretaries to Branches of the Association.

United Kingdom Branch.

THE MOST HONOURABLE THE DOWAGER MARCHIONESS OF DUFFERIN AND AVA, V. & A., C.I.,
Clandeboyne, Ireland.

For the Scholarship Department.—Secretary, Mrs. Bell, 12, St. Leonard's Road, Ealing,
London.

Baluchistan.

Lt.-Col. W. A. SYKES, D.S.O., I.M.S., Quetta.

Bengal.

Major T. C. H. LEICESTER, I.M.S., 6, Harington St.,
Calcutta.

Berar.

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Bombay.

Capt. T. C. LUCAS, R.A.M.C., Govt. House.

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Major E. C. BAYLEY, I.A., Govt. House, Lahore.

THE COUNTESS OF DUFFERIN'S FUND.

The National Association for Supplying Female Medical Aid to the Women of India.

Twenty-fifth Report of the Central Committee for the year 1909.

IN presenting its Twenty-fifth Annual Report of the National Association for providing Female Medical Aid to the Women of India the Central Committee is glad to once more present a statement which indicates steady progress throughout the country. The report has been considerably reduced in size, and a number of appendices which have hitherto been published have been omitted.

During the year Her Excellency the Lady President visited a number of female hospitals in various parts of India, and was gratified to find that in many centres active efforts were being made to provide better accommodation for purdah patients. Lady Minto was also highly pleased with the excellent work which was being accomplished by many lady doctors.

The objects for which the Victoria Memorial Scholarships Fund was inaugurated are now being gradually attained in various centres in India, and a separate account of the work accomplished in this direction is again given under a special heading at the end of this volume.

The report contains the statistics and details of the main operations of the Fund during the past year, and it also includes a précis of the work accomplished in the United Kingdom and in Baluchistan, Mysore and certain Native States which do not publish separate reports. Those who are interested in the details of relief which has been afforded in Bengal, Berar, Bombay, Burma, the Central Provinces, Eastern Bengal and Assam, Madras, the North-West Frontier Province, the Punjab, and the United Provinces of Agra and Oudh can obtain the Provincial reports through the respective Honorary Secretaries of these branches.

The Committee desires to explain that the principal reason for delay in the publication of the Report for 1909 has been due to the fact that the important questions which have recently arisen have involved many references to the Provincial Committees, as well as some correspondence with the Dowager Marchioness of Dufferin and Ava, the Foundress of the Fund, and the United Kingdom Branch of the Association.

In May 1909, a Sub-Committee was specially appointed consisting of Her Excellency the Lady President, the Hon'ble Mr. Sinha and Hon'ble Sir Herbert Risley, Lieutenant-Colonel C. P. Lukis, and Surgeon Lieutenant-Colonel Crooke-Lawless as Honorary Secretary, to consider various suggestions for improving the work of the Association.

The eventual outcome of the Sub-Committee's deliberations was the appointment of an Officer of the Indian Medical Service and a lady doctor to report upon the Dufferin Institutions in certain Provinces which accepted the principle of inspection.

The Committee were fortunate, through the kind offices of His Honour Sir John Hewett, in obtaining the services of Major Birdwood, an officer with large experience in the organization and management of female hospitals, whilst Miss K. Vaughan very generously offered her services at a purely nominal rate.

Their joint reports on the working of the Fund are most interesting and valuable, and it is evident that independent inspections of this sort are productive of much good, and the Central Committee hope, with the co-operation of the Provincial Committees, to continue the system.

These reports really belong to the present year and cannot well be dealt with here; but it has been decided that immediate action is advisable in order to meet the criticisms made regarding the annual report of the Central Committee.

Each Provincial Committee publishes its own report containing all matters of local interest: it seems unnecessary therefore for the Central Committee to publish so bulky a volume as heretofore, and this is an attempt to reduce it to much smaller dimensions which has been undertaken by a Sub-Committee consisting of the Director-General, Indian Medical Service, and the Honorary and Joint Secretaries.

This should be a source of gratification to the Provincial Branches who in future will not be expected to supply a mass of figures, and it will also materially reduce clerical labour in the Central office.

The report of the Sub-Committee above alluded to will be found in the appendices attached to this volume. The recommendations and decisions arrived at by Miss Vaughan and Major Birdwood will be duly recorded in the Central Committee's report for 1910.

It is apparent from these reports that before any real and satisfactory progress can take place in the Dufferin organization the pay and prospects of the real workers, the Medical Women of India, must be materially improved. Consequently the Central Committee has again approached the Secretary of State, through the Government of India, for a grant which will enable it to make a commencement, and it is to be hoped that the present appeal may be favourably considered.

All previous reports of the Committee have invariably endeavoured to acknowledge the fact that the success of the Association mainly depends upon

the measure of support which it receives from the united efforts of a large number of local organizations and individuals, and the Central Committee has often regretted that it is not possible to express its acknowledgment separately to those who have worked so strenuously and unselfishly in its behalf. But the fact that there are now over 50 medical women of the higher grades alone in more or less important centres engaged in furthering the objects of the Association, is perhaps sufficient proof of the inability of the Committee to individually thank as it would wish to all those engaged in its work. Her Excellency the Lady President and the Central Committee would, however, as usual, once more record their cordial acknowledgments to the Lady Presidents and members of the Provincial and District Branches, to the Political and Medical Officers throughout India for their continued valuable co-operation and assistance, and especially to the Honorary Secretaries of the Provincial and Local Committees, and to the medical women in charge of the different hospitals to whom is due so much of the success which has been attained.

The Committee desires to draw the attention of readers of this report to the important alteration in its policy with regard to the method which has hitherto been followed in giving statistical details of what is being done for Indian women in the way of affording them female medical relief.

In previous years it has been fully explained that the main object of the Dufferin Fund is the amelioration of the condition of the women and children of India, and the chief reason for issuing the annual report is to show how far this has been effected. The Central Committee has hitherto given as complete a summary as possible of the medical relief afforded to women in zenana hospitals and dispensaries throughout the country, and has not confined its attention to those institutions which directly owe their existence to its efforts, but has attempted to give statistics and details regarding all hospitals officered by women, whether these were entirely supported by Government, by Native States or Municipalities, or by branches of the Association itself.

A number of the institutions, which are now entirely independent of the Dufferin Fund, were in the first instance in receipt of grants-in-aid from it. As local interest became awakened in a hospital at work, private subscriptions or local bodies came to the aid of the Fund, which, as the older institutions became independent of its support, was set free to direct its attention to new schemes and more needy localities. The Association does not abandon its interest in the institutions which have become independent of its pecuniary aid: it has, on the contrary, an earnest desire to keep itself informed of the condition and progress of these hospitals. There are, too, some hospitals which having been generously endowed at their origin, have from the first been independent of aid from the Dufferin Fund. But the inception of these hospitals was due to the formation of the Association itself, and not a few of them have received directly from the Committee the services of lady

doctors and assistants necessary to start the work, and have thus been practically affiliated from the beginning to the Association, although they have received no pecuniary help from it.

Moreover, the Association feels that it can justly claim, in the large majority of cases, to have directly encouraged the erection of female hospitals in Native States, and applications are continually made to the Committee by Durbars for assistance in procuring lady doctors, and for advice in difficulties. The Dufferin Fund was started with the object of affording "Female Medical Aid to the Women of India," but it was never imagined that the Fund would of itself be able to supply that great need to the whole of India.

In spite of the fact however that the Committee has endeavoured to give a more or less complete idea of what has been accomplished in the way of the female medical relief of women in India, without claiming more credit than it has deserved, there is no doubt that in several parts of India the inclusion of statistics relating to hospitals which are practically independent of the Association, has been misunderstood and false impressions of the real status of the Association, as well as of actual work accomplished by the Countess of Dufferin's Fund, have got abroad.

The Committee therefore, after full consultation with its Provincial branches on this subject, has decided that in future the returns of patients treated shall be confined to the classes treated under the following headings :—

- (a) Patients treated in hospitals which are mainly controlled and aided by the Dufferin Fund.
- (b) Patients treated in hospitals assisted by the Dufferin Fund.
- (c) Patients treated in hospitals in Native States (including returns by the Mysore Branch).

It is hoped that this procedure will commend itself to all supporters and well-wishers of the Association.

This procedure is not followed as strictly in this report as the Committee could wish, but this is owing to the fact that the majority of the Provincial reports have already been compiled and published on the old system. Next year the Committee hopes to submit a statement more accurate in some of the details.

Lady Doctors. There have been a number of appointments, transfers and changes during the past year. Some of the principal changes have been as follows :—

Miss F. Wells, L.R.C.P. and S., succeeded Miss Winckler-King, M.D., who died early in the year, at the Victoria Caste and Gosha Hospital in Madras, and Miss L. Brown, M.D., moved from Lucknow to Bangalore, *vice* Miss J. A. Vaughan, who was appointed to the Rampur State Hospital.

Miss T. Conasagaby, L.R.C.P. and S., was appointed to Alwar, *vice* Miss V. A. Turkhud, M.B., who resigned, and Miss A. M. Watts, L.R.C.P. and S., proceeded to Fort Sandeman to replace Miss L. Gonzalves.

Miss M. Iles, M.B., resigned her appointment at Bhopal and was succeeded by Miss F. D. Barnes, M.D., and Miss M. E. Staley, M.B., was succeeded at the Lady Aitchison Hospital at Lahore by Miss D. L. Pratt, M.B.

Miss Iles after leaving Bhopal was appointed to the female hospital at Delhi, *vice* Miss B. M. Cunningham, M.B., who resigned while on leave in England. Miss M. A. D. Naoroji, M.B., proceeded to Shikarpur, *vice* Miss O. T. Leonard, M.B., transferred to Karachi and Miss Huffton temporarily appointed at Rampur, *vice* Miss J. A. Vaughan on leave. Miss K. Reed, L.R.C.P. and S., returned to Tonk after proceeding to England to take a higher degree in medicine.

The Committee again wish to point out that, owing to the steady annual increase in the number of ladies who possess the higher degrees in medicine, the Association cannot guarantee to provide employment, carrying a suitable remuneration, immediately it is required, or indeed within any given period. The number of appointments, especially those carrying the recognized pay of the higher grade, are strictly limited, and the most the Central Committee can do is to endeavour to fill such vacancies as arise with the best material at its disposal. In all cases where the Central Committee is asked to recommend a lady for a post in a Native State or for a particular hospital, the claims of each and every registered candidate for employment receive full and impartial consideration. It should also be borne in mind that the final selection and appointment of candidates for a considerable number of posts rests with the local authorities concerned. The fact, moreover, that the Central Committee has assisted students, who have been recommended by the Principals of Medical Colleges in India as likely to prove successful medical women, with scholarships during their college careers, does not in any way render the Committee responsible for providing them with permanent employment under the Association. Nor does it guarantee to provide with first grade posts immediately on their return to India ladies, whom it may have recommended to the United Kingdom Branch as worthy of assistance, in order that they may take the higher degrees in medicine. It has happened on several occasions during the past few years that ladies who have not been altogether satisfied with their posts have resigned them somewhat suddenly, sometimes before they have taken the precaution of securing the promise of a new appointment. As the supply of medical women continues to be considerably in excess of the demand, especially where fairly well-paid posts are in question, the Committee takes this opportunity of again warning all ladies connected with the Fund that they run considerable risk in hastily throwing up appointments, however uncongenial they may appear to be.

The Central Committee begs also to remind Honorary Secretaries of Provincial and Local Committees that a list of candidates for employment is always maintained in its office, and to state that if ladies who wish to proceed on leave would notify their desire as early as possible to their Local or

Provincial Committees, it would greatly facilitate the work of those who have to arrange for filling their posts during their absence.

Patients
treated during
the year.

In Appendix IV are given, in the forms already alluded to, details of women and children treated by female agency in zenana hospitals, wards and dispensaries throughout the country.

It will be seen that in Native States, no less than 545,158 patients were treated in hospitals officered by women.

As the majority of these hospitals undoubtedly owe their origin to the efforts of the Dufferin Fund, and as a considerable number are now officered either by lady doctors, nominated by the Central Committee, or by ladies who were materially assisted in their medical studies by the Association, the Committee considers that it has every right to take to itself substantial credit for the success attained in this direction.

The actual number of women treated in (a) hospitals mainly controlled and aided by the Dufferin Fund was 285,361, and the number treated in (b) hospitals assisted by the Dufferin Fund was 287,759.

The work accomplished by Missionary Societies is not here reviewed, and these tables contain no details of patients treated by many midwives who have received their training through the Countess of Dufferin's Fund.

There are moreover a number of private female practitioners in India, many of whom have been at some time or other connected with the Association, and some of whom have received scholarships and direct assistance at its hands; but the Association is not in a position to obtain details of the useful work accomplished by these ladies.

The Committee trusts that Honorary Secretaries and Lady Doctors will continue to see that returns are submitted on the principle which has been laid down by the Government of India for the State hospitals.

One of the purposes of the returns is the comparison they afford of the work accomplished in institutions of corresponding size and scope, but such comparison is difficult, or impossible, if in one case the figures representing patients treated are the number of the total *visits* or *attendances* of new and old patients, while in another they are the number of the *individuals*, or of *new patients* only. If statistics are to be of any value, they must be compiled on one uniform basis. If, for example, the same person attends for 10 days, she should not be counted 10 times, but if she reappears as a fresh case she should be counted again. The returns should include both those patients remaining from the previous year, and those admitted during the year under report. The Central Committee, having had its attention drawn to the probable inaccuracy of some of the returns, again desire to make the position quite clear in future.

Cost of
hospitals,
and progress
in building.

The Committee find from information which has been supplied from the Provinces that the value of buildings which have either been constructed for, or presented to the Association or have been specially set aside for furthering the object of the Fund, exceeds 50 lakhs.

Statement showing the total income of the Central Committee and of each Provincial Branch (Subordinate Branches included) for the year 1909, and the sources whence derived, *viz.*—

BRANCHES.	(1) Funds invested.	(2) Interest from invested funds.	(3) Donations from the Public. Receipts from entertainments, etc. Contributions to Hospital building funds, etc.	(4) Grants from the Provincial Government	(5) Grants from District Boards	(6) Grants from Municipal funds.
	<i>R</i>	<i>R</i>	<i>R</i>	<i>R</i>	<i>R</i>	<i>R</i>
Central Committee—						
<i>Dufferin Fund</i>	6,22,500	28,954	5,009	...	..	..
<i>Victoria Memorial Scholarship Fund</i>	6,73,500	28,321	...	...	..	..
United Kingdom . .	34,110	1,065	3,900		..	...
Bengal	82,016	3,170	12,259	1,650	6,572	1,279
Punjab	1,73,700	8,006	29,391	12,430	7,262	16,158
Madras	44,000	4,474	25			
Berar	66,000	2,286	2,636	1,543	2,850	1,590
Baluchistan	9,200	795	874	3,660	1,200	2,644
Bombay	1,58,321	7,431	7,471	6,500	12,172	15,818
Eastern Bengal and Assam	69,554	2,499	1,352	580	2,780	840
Central Provinces . .	1,48,840	8,260	5,203	3,840	2,650	2,840
United Provinces . .	1,78,596	21,298	68,418	30,683	49,132	17,102
Burma	14,809	347	3,217	6,000		6,525
Mysore	11,000	384		...	...
TOTAL	24,41,146	1,17,791	1,39,955	66,940	84,618	64,796

It will be noticed from these figures that the support given from Government sources during the year amounted to Rs. 2,16,354, and that from invested money contributed by the public, and from public receipts, Rs. 2,56,622 were received.

With regard to the valuable support which has been recently given to the Dufferin Fund movement by local bodies, it may be explained that the promoters of the Association always hoped that each year the management of female hospitals would pass more and more into the hands of the people for whose benefit the movement was organised. Lady Dufferin always recognised that the work was too large and important to depend entirely upon

the precarious income derived from a subscription list, or even upon the generosity of princely donors, and in a paper which emanated from the Home Department in 1887 the attention of Municipalities was drawn to the fact that women have legitimate claims upon a portion of the funds set aside for medical purposes.

In concluding this Report, as the Committee think it advisable to furnish the means of estimating the value of the work done, it will be necessary to summarise some facts and figures of the operations of the Association.

Branches.—Including the United Kingdom Branch, there are thirteen Provincial Branches working under the Central Committee.

Committees.—Attached in some manner, or affiliated to the Provincial Branches, there are about 140 Local and District Associations or Committees engaged in furthering the objects of the Association.

Hospitals.—It will be seen that in Appendix IV statistics are given of the work accomplished in about 160 hospitals, wards and dispensaries of various kinds for the treatment of women, many of which are officered by women, or have women attached to them, and a number of these institutions are directly governed by or affiliated to the Association : many, however, are quite independent of it ; but all are doing the same work—providing *female* medical relief to the women of the country.

Approximate value of Institutions.—Including the cost of hospitals built by the Fund, a large number of buildings which have been presented to it, and others maintained from independent sources, the total value of institutions engaged in furthering the objects of the Association is now computed at about 50 lakhs.

Patients.—In hospitals more or less controlled and assisted by the Association or at their homes, about 1,118,278 women and children received medical aid during the year under review.

Lady Doctors.—Fifty-five lady doctors of the first grade, ninety-five assistant surgeons, and 487 hospital assistants, practitioners, etc., besides a large number of midwives and nurses not included in these statistics, are employed in the various zenana hospitals and institutions in India.

Female Students.—The Branch returns show that, including nurses and compounders, 658 women are at present studying medicine or are undergoing training of some nature in various classes of the medical colleges, schools and hospitals in the different provinces.

Receipts.—The total receipts of the Central Committee, since the Association was incorporated, have up to date amounted to Rs14,20,000. This does not include a sum of nearly seven lakhs subscribed towards the Victoria Memorial Scholarships Fund which was inaugurated by Lady Curzon in 1901-02.

Disbursements.—A sum of Rs6,65,000 has been re-allotted by the Central Committee to Provincial Branches, or expended in grants-in-aid within their limits for various objects.

Investments.—The amount now invested by the Central Committee Provincial and District Branches is Rs24,41,146.

United Kingdom Branch.—The Report of the United Kingdom Branch, included among the appendices attached to this Report, shows that the amount received by it in subscriptions and donations during the year under review was £256. It also has an invested fund of £2,274.

The grateful acknowledgments of the Central Committee are due to the Survey Department, who has provided the excellent map which appears at the beginning of the Report ; and to Messrs. J. J. Meikle, Superintendent, and C. T. Letton, Deputy Superintendent, Government Printing, India, for their valuable assistance in printing this volume.

As this will be the last occasion on which I shall have the privilege of signing this Report, may I be permitted to offer to Her Excellency and the Members of the Central Committee my grateful thanks for the kindness and consideration with which they have treated me during my term of five years as *Honorary Secretary*, and I would also like to place on record my appreciation of the very valuable services invariably rendered by Mr. W. G. Hanrahan, the Assistant Secretary, on whose shoulders falls the bulk of the work of this ever-growing Association.

W. R. CROOKE-LAWLESS,
Honorary Secretary.

SIMLA,
The 15th October 1910.

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W R. CROOKE-LAWLESS,
Honorary Secretary.

SIMLA,
The 15th October 1910.

THE COUNTESS OF DUFFERIN'S FUND,
CENTRAL COMMITTEE

STATEMENT OF ACCOUNTS FOR THE YEAR 1909.

Account of Receipts and Payments of the Central Committee

RECEIPTS.	Details.	TOTAL.
	R a. p.	R a. p.
Cash Balance on 1st January 1909 . . . . .	...	6,836 9 9
<i>Income of Fund—</i>		
Subscriptions and Donations, Life Councillors . . . . .	...
Donation by Their Excellencies The Earl and Countess of Minto	500 0 0	
Subscriptions and Donations, Life Members . . . . .	...
Ditto ditto, Miscellaneous	310 0 0	
Contributions from Branches	1,123 5 0	
Interest on Investments (except Trust Accounts)	28,954 9 5	
Sundry receipts . . . . .	...
		30,887 14 5
<i>Trust Accounts—</i>		
Henry Fawcett Prizes	224 2 8	
Sir Dinshaw Maneckjee Petit	224 2 8	
Sir John Muir	373 10 0	
		821 15 4
Gilchrist Scho'arships	2,254 6 5	2,254 6 5
TOTAL . . . . .	...	40,800-13 11

of the Countess of Dufferin's Fund during the year 1909.

PAYMENTS.			Details.	TOTAL
			R a. p.	R a. p.
<i>Objects of Fund—</i>				
		R a p		
Grants-in-aid, United Provinces Branch.	.	7,200 0 0		
Ditto, Baluchistan Branch	.	3,941 14 11		
Ditto, Central Provinces Branch	.	2,400 0 0		
Ditto, Assam Branch	.	1,920 0 0		
Ditto, Miscellaneous	.	2 584 12 6	18,046 11 5	
<i>Scholarships—</i>				
Central Committee	.	3,231 5 1		
Galchrist Trust	.	2,100 0 0		
Sir Dinshaw Maneckjee Petit	.	249 3 4		
Sir John Muir	.	229 3 4	5,809 15 9	
Gratuities, including Books and Medals	.		256 5 0	
English Lady Doctors under Central Committee	.		3,084 2 8	
Travelling Expenses of Lady Doctors in India	.		390 2 0	
Henry Fawcett Prizes	.		112 0 0	27,699 4 10
<i>Expenses of Fund—</i>				
Advertisements and Printing	.		..	
Telegrams	.		39 13 0	
Postage and Receipt Stamps	.		100 14 6	
Salaries and Wages and travelling expenses of Office	.		4,607 2 0	
Photographs for annual reports	.		..	
Office Contingencies and expenses of Meetings.	.		463 7 4	
Commission on realizing interest, etc.	.		23 15 8	
Office Building	.		1,500 0 0	6,735 4 6
		TOTAL	...	34,434 9 4
Cash Balance on 31st December 1909	.		...	6,366 4 7
		TOTAL	...	40,800 13 11

(Sd.) B. W. MARLOW, Colonel,
Honorary Treasurer.

Progressive Account of the Central Committee of the Countess

RECEIPTS.	Ledger folio.	Amount.
<i>Income of Fund—</i>		<i>Rs. a. p.</i>
Subscriptions and Donations, Life Councillors	13	3,59,000 0 0
Ditto ditto, Life Members	35	1,17,064 2 11
Ditto ditto, Miscellaneous	34	2,54,353 14 6
Contributions from Branches	26	29,579 6 5
Collections in England	28	31,787 1 9
Sundry Receipts	109	6,32 1 6
Interest on Investments (except Trust Accounts)	183	6,38,109 15 11
		14,23,526 11 0
<i>United Kingdom Branch—</i>		
Passage-money allowances	226	598 12 6
<i>Trust Accounts—</i>		
Sir Dinshaw Maneckjee Petit	16	6,462 11 4
Sir John Muir	118	11,103 15 1
Henry Fawcett Prizes	125	8,703 5 11
Gilchrist Scholarships	317	1,845 3 4
		—
		28,115 3 8
TOTAL . . . . .	...	14,49,240 11 2

of Dufferin's Fund up to the 31st December 1909.

EXPENDITURE.	Ledger folio.	Amount.
		<i>Rs. a. p.</i>
	165	1,16,384 14 6
	168	64,800 0 0
	171	88,172 2 11
	207	1,24,073 15 4
	353	2,00,000 0 0
		6,24,338 0 9
Nett charge on adjustment of former investments	242	30,049 10 7
		6,54,387 11 4
<i>Objects of Fund—</i>		
Scholarships	47	59,206 12 9
	136	17,610 14 2
	284	43,651 4 8
	343	2,61,519 3 9
	268	80,469 7 7
	347	17,127 4 2
	339	50,720 12 11
	215	15,104 11 0
	256	11,351 11 0
	228	1,000 0 0
	212	2,790 0 0
	246	11,398 13 3
	278	610 0 0
	282	33,028 12 7
	203	6,000 0 0
	286	5,100 0 0
	270	438 11 4
	241	547 5 4
	324	1,800 0 0
	146	6,073 8 0
Travelling expenses of Lady Doctors in India	335	34,201 1 1
	309	4,070 8 4
<i>United Kingdom Branch—</i>		
Salaries and travelling expenses of Lady Doctors in India	302	1,945 2 9
		6,65,786 0 8
<i>Expenses of Fund—</i>		
Advertisements and Printing	53	10,600 7 8
	77	2,187 15 6
	80	3,728 1 1
	94	85,848 8 1
	351	6,042 4 1
	297	100 0 0
	161	9,137 1 2
	341	1,456 5 0
Office Building	356	1,500 0 0
		1,22,700 10 7
Cash Balance on 31st December 1909		6,366 4 7
TOTAL		14,49,240 11 2

Investment Account of Central Committee.

	Nominal Value.	Cost.
	Rs. a. p.	Rs. a. p.
5% Calcutta Municipal Debentures, 1886-87	1,50,000 0 0	1,46,384 14 0
4% Ditto, 1895-96	60,000 0 0	64,500 0 0
4% Ditto, 1903-04	87,500 0 0	88,179 2 11
4½% Calcutta Port Trust Debentures of 1883	1,25,000 0 0	1,24,973 15 4
Loan at 6 % per annum to Bengal Court of Wards, Shakarpura Estate	2,00,000 0 0	2,00,000 0 0
TOTAL	6,22,500 0 0	6,24,338 0 9

CALCUTTA;
The 1st March 1910.

(Sd.) B. W. MARLOW, Colonel,
Honorary Treasurer.

APPENDICES.

APPENDIX I.

Report of the Sub-Committee of the Central Committee, Countess of Dufferin's Fund, appointed on the 11th May 1909 to consider and report upon certain proposed changes in the Administration of the Fund.

More than two years ago, as a result of visits to hospitals in various provinces and interviews with many persons interested in the Dufferin Fund, Her Excellency the Lady President was led to think that the time had come to consider whether the administration of the fund was not susceptible of improvement in certain directions. It then seemed to her—

- (1) that in the majority of the Dufferin Hospitals no really effective *purdah* system had been carried out, with the consequence that those hospitals had failed to attract genuine *purdahnashin* women ;
- (2) that the pay and position of medical women possessing high professional qualifications called for some improvement ; and that in carefully selected cases, such women might be given the entire control of the hospitals under their charge ;
- (3) that it was desirable to secure skilled female inspection for those hospitals portions of which are managed on a strictly *purdah* system ;
- (4) that steps should be taken to provide more efficient nursing in Dufferin Hospitals.

2. A reference has been made to Lady Dufferin on the subject and a letter has been received from her expressing the opinion that some change is advisable in the management of the fund. At the same time public attention has been aroused by the action of the more advanced lady doctors in India who have formed an Association to advocate their views, and who now publish a quarterly journal in which the management of the Dufferin Fund is freely and sometimes severely criticised.

3. For these reasons Her Excellency decided to appoint a small Committee consisting of the following gentlemen, to assist her in the consideration of the group of questions involved :—

The Hon'ble Mr. S. P. Sinha.
Sir Herbert Risley, K.C.I.E., C.S.I.
Lt.-Colonel C. P. Lukis, I.M.S., with
Surgeon-Lieut.-Colonel Crooke-Lawless as Secretary.

4. The points referred to us were—

- (1) Whether fuller effect should be given to the *purdah* principle in female hospitals, and if so, how ?
- (2) Whether any restriction should be placed on the classes of diseases, or of females, or children admitted to female hospitals ?
- (3) Whether specially selected lady doctors should be given entire charge of their hospitals, free from male supervision of any sort, and, if so, what lady doctors, or hospitals, and by whom to be selected, and the procedure for bringing this about ?

- (4) Whether a whole-time lady doctor, specially qualified, be engaged to inspect female hospitals, or each Province be advised to arrange for its own Inspector from its lady doctors, the Central Committee providing some fixed sum for travelling expenses?

5. In order to ascertain the facts and obtain a clear view of the issues involved, we invited the three medical women* who had taken a leading part in urging reform to come to Simla and discuss matters with us. This discussion took place on the 25th of June. It covered much ground and extended to various matters not directly relevant to the questions now under consideration. The main points for which the lady doctors contended may, however, be stated as follows :—

- (1) That hospitals and dispensaries for women should be made strictly *purdah* and controlled by fully qualified medical women.
- (2) That the existing system of supervision by lay Committees and Civil Surgeons stands in need of amendment.
- (3) That the status of medical women in India should be improved; and that for this purpose the object to be ultimately aimed at is the creation of a graded medical service for women on the lines of the I. M. S.
- (4) That a highly qualified medical woman should be appointed to inspect and report on the work done under the Dufferin Fund and the Victoria Memorial Fund, in order that her report may form the basis of a working scheme of reform.
- (5) That the present system of granting Dufferin scholarships should be examined with the object of improving the methods of selection and reducing the expenditure.
- (6) That a system of large base hospitals should be introduced, the smaller hospitals being worked in connection with the base hospitals under the supervision of the medical women in charge of the latter.
- (7) That the base hospitals should be made partly self-supporting by charging fees to patients.

6. We have carefully considered the four questions referred to us by the Lady President in the light of the statements and suggestions made by the medical women. The materials at present before us are too scanty to enable us to propose any considerable change of policy, still less to draw up a complete scheme of reform. No sweeping change in the administration of the Dufferin Fund could be effected without the concurrence and active co-operation of the Branch Associations, in whom the independent management of their own affairs and funds is vested by Rule 18 of the Rules and Regulations. We confine ourselves therefore to submitting, for the consideration of the Central Committee, a preliminary report setting forth some provisional conclusions, and recommending that certain enquiries be undertaken with the object of ascertaining what reforms in the existing system are desirable and practicable.

7. In the first place, we are clearly of opinion that sufficient grounds exist for enquiring into the extent to which effect is given to the *purdah* principle in the more important Dufferin Hospitals. Seven years ago a strong Sub-Committee appointed to consider certain questions of reorganisation and supervision drew attention to the fact that there had been at that time in the public press "a certain amount of complaint that men have at present too much and women too little to do with the management of the Dufferin Hospitals." The view then expressed is borne out by the unanimous opinion of the ladies who appeared before us that, under the existing system, *purdah* ladies are deterred from entering Dufferin Hospitals by the fear of being brought into contact with patients of inferior social standing or undesirable character. The prevalence of a similar state of

* Miss Benson, Superintendent, Cama Hospital, Bombay.
Miss Staley, Superintendent, Lady Aitchison Hospital, Lahore,
Miss Vaughan.

things at the Dufferin Hospital, Calcutta, was brought to notice by Sir Herbert Risley in a note written in 1900 on the arrangements for receiving *pardah* patients. We are of course well aware that the Dufferin Fund was instituted for the service of all classes of women in India. Its Title and its articles of Association show clearly that its founders did not intend its benefits to be restricted to *pardah* women. It is equally clear that the recognition of the *pardah* principle was an essential feature of their scheme, and that any system which had the effect of excluding *pardah* women from the Dufferin Hospitals would have been regarded by them as a serious departure from the original objects of the Association. We readily admit the impossibility of framing any accurate definition of what is called the *pardah* principle. But for working purposes it is sufficient to say—that a hospital which provides accommodation of a suitable character for *pardah* women and also accommodation of a less special character for women who do not observe *pardah* strictly may fairly be described as a *pardah* hospital. Such a hospital should, in our opinion, be divided into two sections—

(a) a *Pardah* section with special arrangements for privacy on the family basis; and

(b) a general ward or wards for respectable women who are not strictly *Pardah*.

The distinction between these two classes would have to be carried out by the lady doctor in charge; and although no precise definition is possible, it is believed that in practice no serious difficulty will be found. To what extent the existing Dufferin Hospitals comply with these conditions is a question which can only be settled by means of an enquiry of the kind that we propose below.

8. Turning now to the second question referred to us we think it would be contrary to the principles of the Memorandum of Association to place any restriction on the classes of diseases or patients that may be admitted to female hospitals. There is, however, no objection either of principle or practice to the separation of classes of patients and diseases within a hospital, and we believe that such separation will remove most of the causes which deter *pardah* ladies from resorting freely to Dufferin Hospitals.

9. On the third question our view is that the great advance that has taken place during recent years in the professional training of medical women, and the high capacity of many women who adopt a medical career, amply justify us in accepting the principle that specially selected medical women may properly be entrusted with independent charge of Dufferin Hospitals without male supervision of any kind. In other words, we consider that such women may be placed, in respect of their hospitals, in the same position as Miss Benson holds in respect of the Cama Hospital, Bombay. It further appears to us that the arrangement which we propose is in accordance with the Memorandum of Association and is contemplated by Rule 20 of the Rules and Regulations. If the general principle is accepted, it will rest with the Branch Associations to give effect to it with due regard to local conditions and to the qualifications and administrative capacity of the medical women serving them. We suggest that they may be assisted in arriving at a decision by the proposal that we make below regarding inspection.

10. The fourth question is, in our opinion, the most important of those referred to us by Her Excellency the Lady President. Seven years ago the Sub-Committee mentioned above observed that the Central Committee had "felt the want of a report by some one competent and responsible individual of the working of all hospitals under each branch" and suggested that such reports should be furnished by the Inspectors-General of Civil Hospitals. It would seem, however, from a later paragraph of their report that they realized that their

said—"We do
id inspect the
hardly fail to

be productive of good, but she must be of such high standing and experience as to silence jealousy, and it would be necessary to pay her very highly indeed, since she would have no opportunity for private practice." Their remarks on the subject of cost applied to the

permanent appointment of an inspecting medical woman immediately subordinate to the Central Committee. They approved of such an appointment, while indicating some difficulties attending it, and they put the proposal aside mainly, if not entirely, on the ground of its expense. Subsequent experience has, we believe, shown that the Inspectors-General are at a great disadvantage in inspecting Dufferin Hospitals, and that their reports have not been of much use to the Central Committee. The dilemma is a formidable one. As Lady Dufferin observes in her last letter, so long as male doctors are allowed to enter a hospital, even if only for inspection, "the really *purdah* women will not come in." On the other hand, if *purdah* hospitals are left without any inspection at all, various kinds of abuses will grow up and will continue uncorrected. We are convinced therefore that sooner or later arrangements will have to be made for the regular inspection of Dufferin Hospitals by qualified female agency. What form those arrangements should take is a matter for future consideration, and we cannot pronounce a final opinion on it at present. The appointment of a single Inspectress for all hospitals under the fund is not free from financial difficulties, and might create friction between the Central Committee and the Branch Associations; while inspections carried out in the provinces by medical women deputed *pro hac vice* by the Branch Associations would be wanting in breadth of view and variety of experience, and would be of less service to the Central Committee. The proposal which we now recommend to the Committee is of a more modest character. As a result of the discussions which took place at our meeting with the medical women, Miss K. O. Vaughan has offered to place her services at the Lady President's disposal for six months without pay for the purpose of inspecting Dufferin Hospitals in Upper India on behalf of and under the instructions of the Central Committee and with the concurrence of the Branch Associations. We believe that it is only through such an inspection that the Central Committee can obtain an adequate knowledge of the essential facts, and can be placed in a position to deal with the various questions that will come before them in the immediate future. Miss Vaughan is well qualified to undertake the duty both by her professional qualifications and by her experience of hospital work in India. We accordingly recommend—

- (1) That Miss Vaughan's offer be accepted for six months from the 1st September.
- (2) That during her employment she be given the travelling allowance of a first class officer under the Civil Service Regulations.
- (3) That the Branch Associations, except those of Madras and Bombay, be asked to give her all reasonable facilities for inspecting typical hospitals under their control.
- (4) That her reports be submitted to the Branch Associations and forwarded by them, with their remarks, to the Central Committee.
- (5) That at the centres visited by her she should inspect the *dhai* classes under the Victoria Memorial Fund, and submit her reports direct to the Committee of that Fund.
- (6) That the cost of her deputation be divided between the two Funds in such proportion as may be equitable. The instructions given to Miss Vaughan would indicate the points to which she should direct her attention, and would be framed so as to ensure that her reports, together with the comments and recommendations of the Branch Associations, shall provide a sound basis for such further action as may be called for.

(Sd.) MARY MINTO.

S. P. SINHA.

H. H. RISLEY.

C. P. LUKIS.

APPENDIX II.

Students studying in the Medical Colleges and Schools
of Medicine in India.

Medical College, School or Hospital Class.	University Course.	Assistant Surgeon or Medical Prac- titioner Class.	Hospital Assist- ant Class.	Midwifery, Nursing or Compounding classes, or attending lectures.
Agia		72	11
Bombay	5	50	..	43
Calcutta	11	15	14	63
Madras	7	23	..	20
Lahore	10	..	23
Patna	3	..
Burma	38
Hyderabad, Sind	3
Lucknow	12
Jaipur	13
Quilon	10
Bharatpur	4
Srinagar	5
Amraoti, Berar	2
Baroda	3
Mysore	3
Karachi	4
Dacca	6
Bhopal	7
Ahmedabad	9
Hyderabad, Deccan	8
Cuttack	10
Benares	4
Patna	14
Sibi	3
Kotah	6
Akola	5
Nagpur	11
Bangalore	1
Delhi	13
Ludhiana	80
Feroz	4
Ahmednagar	1
Patna	1
Bahawalpur	5
TOTAL	23	98	199	448

The Countess of Dufferin's Fund.

APPENDIX III.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association.

Particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association.			
Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	How OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).
Baluchistan.			
QUETTA Lady Sandeman Zenana Dispensary.	R 9,620	By Municipality and Fund.	
SIBI MacLvor Hospital and Lady Doctor's quarters.	1,465	...	
FORT SANDEMAN. Zenana Hospital	4,855	Partly	Presented by Sirdar S. Singh, Contractor.
TOTAL	15,940		Partly by Bazaar Fund.
Bengal.			
BANKURA Lady Dufferin Zenana Hospital.	R 8,274	Built by donations and subscriptions from zamindars, District Board and Bengal Branch of the Dufferin Fund.	The land on which the Hospital stands with its compound was presented by Bengal Government.
BETTIAH BHAQULPUR Dufferin Hospital Rani Shibtarini Hospital Victoria Memorial	80,000 10,000	.....
BIRDHUM Lady Doctor's quarters Lady Curzon Zenana Hospital. Mrs. Carstairs' cottage .	25,000 2,000 6,442	Raised by subscriptions late Queen. Fund. By subscriptions	Bettiah Raj. Raja Shib Chunder Banerjee.
DARBHANGA. MADHUBANI. Dufferin Hospital Victoria Memorial Zenana Hospital.	2,109 33,000 3,500	Government grant of Rs. 1,000 and Rs. 50 from Mrs. Carstairs. Raj Darbhanga. Public subscriptions.	The site was presented by Government. The land was given by the landlord free of rent, which was purchased at a cost of Rs. 594-1-6.
GAYA Lady Doctor's residence	10,000	.....
HOOGHLY Lady Elgin Zenana Hospital, cottage wards and other subsidiary buildings. Female Ward, Pilgrim Hospital.	64,813	Built by Fund.	Presented by Raja Rameswar Prasad Narain Singh of Muksudpur.
BERHAMPUR KHULNA Branch Female Hospital	14,000	.....
Victoria Zenana Hospital Woodburn Hospital, Mrs. Collins' Zenana Cottage.	20,000 9,000 6,000	Additions and alterations made from local funds. Built by subscriptions and donations. Built by donation and Government grant.	Old Hospital building belongs to the Municipality. Lent by Government.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not),		Approximate value of same.	HOW OBTAINED.		
			Built by Fund.	Presented and by whom (or otherwise).	
Bengal—contd.					
		R			
RANCHI.	Zenana Hospital . .	5,583	}	Built from funds mainly contributed by the Maharaja of Chota Nagpur and his brother, Kumar Jogotmohan Nath Sahu Deo	
CHAPRA	Charitable Dispensary, Female Ward.	26,500		Presented by the Maharani of Hatwa.	
SHAHABAD	{ Dumraon Female Hospital.	400		}	By the Maharani of Dumraon
MONGHYR	{ Ditto Female Ward	200			
	Lady Mackenzie Zenana Hospital.	7,859	.....	Presented by Rai Kamaleswari Prasad Sing Bahadur.
CALCUTTA	Lady Dufferin Victoria Hospital.	5,65,108			
	The Surnomoyee Hostel	50,000		..	
	Lady Elliott Hostel . .	25,000	By special subscriptions.	House for female students.	
24-PARGANAS	Sagore Dutt's Female Charitable Dispensary and Hospital.	11,744	..	Built by Sagore Dutt's Fund for Dispensary purpose	
	TOTAL .	9,86,532			
Berar.					
		R			
AMRAOTI	Female Hospital . .	34,084	By funds locally collected.		
	TOTAL .	34,084			
Bombay.					
		R			
AHMEDABAD.	Victoria Jubilee Hospital and Dispensary.	1,39,638	.....	The late Rao Bahadur Ranchorlal Chotalal, C.I.R., his son Madharlal and grandson.
BIJAPUR	Lady Dufferin Hospital	5,000	By Fund . .	Lent by the District Board.	
HYDERABAD (SIND).	Women's Hospital . .	27,154		Site presented by Municipality	
SHIKARPUR	Victoria Jubilee Lady Dufferin Hospital	34,972	..	Lent by Government	
SHOLAPUR	Lady Reay-Dufferin Hospital, including Town Dispensary.	12,000	.....	The Hospital building has been lent by the Municipality, and the Dispensary has been rented.
SURAT .	Morarabhai Vrijbhukhandas Hospital and Dispensary for Women and Children.	52,057	Partly, by a grant of Rs. 1,386.	By a gift of Rs. 48,000 by Seth Morarabhai Vrijbhukhandas and his widow; balance by Fund and Municipality.	
KARACHI	Dufferin Hospital . .	1,10,000	.....	Building by Mr. Edulji Dinshaw, C.I.R. Site by Municipality.
	TOTAL .	3,80,821			

The Countess of Dufferin's Fund.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).
Burma.			
R			
RANGOON . Dufferin Maternity Hospital. Quarters for nurses . Ditto . . . TOTAL .	1,19,538 31,968 8,403 1,59,909	Voluntary contributions and donations, grants from Local Government, Central Committee, and Rangoon and other Municipalities in Burma.	Site given by the Government of India.
Central Provinces.			
R			
NAGPUR . Dufferin Hospital for Women. Zenana Wards . . . Quarters for the Resident Medical Officer and Matron.	50,000 4,000 9,663	Built with Rs14,282 from Provincial Branch, Rs5,000 from Central Committee and Rs6,852 from subscriptions. Built by Fund. Built by Fund.	Subscriptions of Rs13,000 were received from Rai Bahadur Seth Kastwar Chand, Rs4,500 from the Nagpur Municipality, Rs2,000 from Rai Bahadur Appaji Buti towards Hospital Building Fund and Rs4,366 from Government. Subscription of Rs2,500 from Seth Bachraj of Woodhar, and Rs500 from Manager, Empress Mills.
RAIPUR . Dufferin Ward in Municipal Hospital. Dufferin Ward in Municipal Hospital for the out-patients' block, Female Hospital Assistant's quarters and wall.	6,000 20,000	Built by Municipality.	Rajah Kamal Narain Singh, Feudatory Chief, Khairagarh.
JUBBULPORE . Lady Elgin Hospital . Quarters for Hospital Assistant.	20,000 1,700	..... Built by Fund.	Raja Gokul Dass.
SAUGOR . Wards for In-door patients.	725	Built by Fund.	
KHAIRAGARH . Kamal Narain Dispensary	6,090	.....	Built by Khairagarh State.
TOTAL .	1,18,178		
Eastern Bengal and Assam.			
R			
DACCA . Dufferin Hospital . .	18,769	Dufferin Memorial Fund.	
GAUHATI . Female Ward . . . Female Hospital Assistant's quarters.	3,590 900	..... .....	Built by Government, Municipality and Local Board. Built by Local Board.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

		Approximate value of same.	HOW OBTAINED.	
			Built by Fund	Presented and by whom (or otherwise)
Eastern Bengal and Assam—contd.				
		₹		
GOALPARA	Lady Doctor's quarters	1,500	" "	Presented by the Rani of Bijn
BARISAL	Female Dispensary and Lady Doctor's quarters.	10,000	Duffern Memorial Fund.	
JORHAT	Lady Doctor's quarters	1,000	" "	Built by Local Board.
DOGRA	Tahurunnessa Female Hospital.	8,000	" "	Built by Nawab Abdussobhan Chaudhury.
DINAJPUR	Female Hospital	14,000	" "	Built by local subscriptions.
MALDAH	Female Department of English Bazar Dispensary.	Not known	" "	Presented by Babu Sarat Chandra Roy Chaudhuri of Chanchal.
MYMENSINGH	Bidyamoyee Female Hospital.	5,253	" "	Presented by Srimati Bidyamoyee Devi of Muktagacha.
CONILLA	Fairunnessa Zenana Hospital.	10,000	" "	Built and presented by Nawab Shahiba Fairunnessa of Laksham, Tippera.
TOTAL		73,012		
Madras.				
		₹		
MADRAS	Victoria Hospital for Caste and Gosha Women.	1,00,000	" "	Presented by the Rajah of Venkatagiri, K.C.I.E.
MANGALORE	Women and Children's Hospital.	6,500	" "	Belongs to the Municipality.
CUDDALORE	Dispensary for Women and Children.	10,000	" "	Built by Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.
MATTANCHERRY (COCHIN)	Women and Children's Hospital.	20,000	" "	Built by the Cochin Government.
TRICHUR	Civil Hospital	4,000	" "	Ditto ditto.
NELLORE	Jubilee Hospital	22,000	Built by public subscription.	Presented by the Jubilee Committee.
VIZAGAPATAM	Victoria Hospital for Women and Children.	10,000	" "	Presented by Sri Maharaja Gajapathi Rao, C.I.E.
BOBBILI	Rajah of Bobbili's Hospital for Women.	5,000	" "	Presented by the late Hon'ble the Rajah of Bobbili, K.C.I.E.
SALEM	Queen Alexandra Hospital for Women and Children.	22,000	" "	Public subscriptions and Government grant.
VIZIANAGRAM	H. H. the Maharaja Kumarika of Rewa's Caste and Gosha Hospital.	50,000	H. H. the Maharaja Kumarika of Rewa.	Presented by Maharaja Kumarika of Rewa.
BELLARY	Victoria Memorial Women's Hospital.	10,000	V. M. Fund, raised by public subscriptions.	
TINNEVELLY	Duffern Female Dispensary, Vannarpet.	25,000	District Board of Tinnevely.	Rs. 10,000 contributed by Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).

Madras—contd

		R		
ADONI .	V. M. Women's Dispensary.	14,000	V. M. Fund, raised by public subscriptions.	
CONJEEVERAM	Women and Children's Dispensary.	12,800	.....	Rajah Sir S. Ramaswamy Mudaliar, Kt., C.I.E.
CALICUT .	Women and Children's Hospital.	40,000	.....	Partly by subscription, chief donor being Sir S. Ramaswamy Mudaliar, Kt., C.I.E., and partly by the Municipality and District Board.
PUDUKOTTAI	Maharaja's Dispensary for Women and Children.	5,000	.....	State buildings. Presented by H. H. the Maharaja of Pudukottai.
COIMBATORE.	Female Hospital . .	1,000	Purchased by the Municipality.	
COCANADA .	Lady Havelock Hospital	30,000	By District Board, Godavari.	R5,000 contributed by Mr. Venkatarathnam, Rao Bahadur.
	TOTAL .	3,87,300		

Mysore.

		R		
MYSORE	Her Highness the Maharani's Hospital.	22,622	.....	By Mysore Government and by contribution.
BANGALORE .	Maternity Hospital .	33,034	.....	Ditto.
KOLAR .	Female Hospital and Dispensary.	5,500	Under construction at a cost of about R5,500.	
CHIKMAGALUR	Ditto .	5,500	Ditto.	
HASSAN .	Ditto .	4,060	.....
MYSORE	Female Dispensary attached to General Hospital.	1,500	.....
BANGALORE .	Female Dispensary attached to City Hospital.	1,500	.....
SHIMOGA .	Female Hospital and Dispensary.	6,000	.....
TUMKUR .	Ditto .	5,248	Under construction	
CHITALDROOG	Ditto .	...	.....
BANGALORE .	Lady Curzon Hospital for Women and Children.	1,10,000	.....	By Government of India and certain native gentlemen in the cantonment.
	TOTAL .	1,94,964		

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).		Approximate value of same.	HOW OBTAINED.	
			Built by Fund.	Presented and by whom (or otherwise).
Punjab.				
		₹		
AMRITSAR .	Municipal Female Hospital.	10,000	.....	Municipal Funds.
DELHI .	Victoria Zenana Hospital.	98,000	.....	By local subscriptions.
GUJRANWALA	Victoria Memorial Female Hospital.	..	.....	Private subscriptions and grants from District Board and Municipal Committee, Gujranwala.
JHANG .	Dispensary Building and Female Ward.	11,000	Municipal Committee, District Board and Government grant, Jhang.	
LAHORE .	Lady Aitchison Hospital for Women.	80,000	.....	Assisted by the Punjab Branch, Countess of Dufferin, with a substantial monthly grant.
LUDHIANA	Memorial Hospital and Victoria Memorial Dispensary.	90,000	.....	Private contribution ₹62,000. Government grant ₹25,000. Victoria Memorial Committee, Ludhiana, ₹3,000.
LYALLPUR .	Civil Hospital (a ward of 12 beds attached to it consisting of 6 separate rooms).	6,000	Municipal . .	Property of Lyallpur Municipality.
RAWALPINDI .	Female Dispensary and Wards.	7,649	} Built by Municipal Committee, Rawalpindi.	
	Quarters for Female Assistant Surgeon.	2,297		
	Quarters for Compounder.	932		
TOTAL .		3,05,878		

United Provinces of Agra and Oudh.

		₹		
AGRA	Lady Lyall Hospital	1,27,003	Built by Fund.	
	Maternity Hospital	35,700	Ditto.	
	Nurses' quarters	8,617	Ditto.	
	Lady Doctor's quarters.	35,299	Ditto.	
	Hostel for Female Students.	18,000	Ditto.	
	Ferozabad Female Dispensary.	6,051	.....	Built by Ferozabad Municipality.
	Pipalmandi Female Dispensary.	...	.....	} On rent paid by the Agra Municipality.
	Tajganj Female Dispensary.	...	.....
ALIDARH	Dufferin Hospital	52,763	Built by Fund	₹35,982 contributed by Rani Khushai Kanwar of Barauli.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*concl'd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.		
		Built by Fund.	Presented and by whom (or otherwise).	
Native States— <i>contd.</i>				
RAMPUR .	Zenana Hospital and Dispensary.	17,000	.....	By the State.
TONK .	Walter Female Hospital	19,500	.....	By H. H. the Nawab of Tonk.
BAHAWALPUR	Jubilee Female Hospital	6,000	.....	By H. H. the Nawab of Bahawalpur.
BIKANER .	Women's Wards of the Bhagwan Das Hospital.	8,985	.....	By Rai Bahadur Seth Bhagwan Das Bagla of Churu.
JODHPUR .	Jaswant Hospital for Women.	50,000	.....	By H. H. the Maharaja of Jodhpur.
BHARATPUR .	Maji Sahiba Darya Kuar's Female Dispensary.	30,270	.....	By H. H. the Maharaja of Bharatpur.
RAJNOR	Rusulkanji Hospital for Women and Children.	80,000	.....	By H. H. the Nawab Sahib of Junagadh.
TRIVANDRUM	Female Ward, General Hospital.	10,000	.....
	Maternity and Women and Children's Hospital.	45,000	.....
JAORA .	Victoria Jubilee Hospital	5,500	.....	By the State.
	Victoria Dufferin Hospital.	20,000	.....
KARALI .	Female Dispensary.	1,200	.....	Municipality.
BAWAR .	Female Wards, Charitable Dispensary.	3,700	.....	District Board and Municipality.
BARODA .	Victoria Jubilee Wards	28,527	.....	H. H. the Gaekwar's Government.
NAHAN .	Jumnabai Dispensary.	1,56,022	.....	Do.
	Zenana Hospital .	13,643	.....	By H. H. the Maharaja of Sirmoor.
HYDERABAD (D).	Victoria Women's Hospital, Hyderabad.	3,70,504	.....	By the State.
	Female Hospital, Gulburga.	9,135	.....	Rs. 6,000 from the Rani Janki Bai of Sarnapatti, balance by the State.
TOTAL		14,48,560		

Abstract.

	R
Native States	14,48,560
United Provinces of Agra and Oudh	9,57,580
Bengal	9,86,532
Madras	3,87,300
Bombay	3,80,821
Mysore	1,94,064
Punjab	3,05,878
Burma	1,59,009
Central Provinces	1,18,178
Berar	34,084
Baluchistan	15,940
Eastern Bengal and Assam	73,012

Total value of buildings 50,62,767

APPENDIX IV.

Return of Patients treated in Hospitals for Women in India.

The following returns of patients treated are divided into three classes, *viz.* :—

Class A.—Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund.

„ B.—In Female Hospitals assisted by the Dufferin Fund.

„ C.—Native States (which now include the statistics returned by the Mysore Branch).

Baluchistan.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Quetta . .	Lady Sandeman Zenana Dispensary . .	41	1,444	615	2,100
Ditto . .	K. B. Barjorjee Patel Ward . .	195	.	.	195
Fort Sandeman	Dufferin Hospital . .	10	5,721	.	5,731
Sibi . .	Female Dispensary . .	42	3,726	54	3,822
	TOTAL . .	288	10,891	669	11,848

Bengal.

Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Calcutta . .	Lady Dufferin Victoria Hospital . .	1,178	7,650	.	8,828
Bhagulpore . .	Rani Shibotarini Banerjee Female Hospital . .	224	6,105	76	6,405
Gaya . .	Lady Elgin Zenana Hospital . .	325	6,580	173	7,278
Palamau . .	„ . .	„	„	34	34
	TOTAL . .	1,927	20,335	283	22,545

Bengal—contd.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Bankura	Lady Dufferin Zenana Hospital	29	2,844	42	2,915
Hazaribagh	Dufferin Hospital	23	2,311	68	2,902
Khulna	Charitable Dispensary	84	1,272	44	1,400
Cossipore	North Suburban Hospital, Female Ward.	145	1,301	126	2,072
Birbhum	Suri Female Hospital	25	3,060	26	3,111
TOTAL		306	11,788	306	12,400

Berar.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Amraoti City	Female Hospital	177	5,269	...	5,446
Akola	Female Ward of Charitable Dispensary.	...	...	42	42
Khamgaon	Ditto	...	...	35	35
Basim	Female Ward of Civil Hospital.	...	...	76	76
Buldana	Ditto	...	...	17	17
Ellichpur	Female Ward of Charitable Dispensary.	...	...	41	41
Nandura	Ditto	...	...	(No figures)	
Daryapur	Ditto	...	...	49	49
Anjangaon Surji	Ditto	...	...	35	35
Yeotmal	Female Ward of Civil Hospital.	...	...	40	40
Morsi	Female Ward, Charitable Dispensary.	...	...	53	53
Mehkar	Ditto	...	...	17	17
Chandur Bazar	Ditto	...	...	42	42
Chandur Railway	Ditto	...	...	15	15
TOTAL		177	5,269	462	6,908

Bombay.

Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund,

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Hyderabad (Sind)	Women's Hospital	815	39,606	10	40,431
Shikarpur	Lady Dufferin Hospital	250	10,279	72	10,641
	TOTAL	1,105	49,885	82	51,072

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Kaira	Civil Hospital and Kapadwanj Dispensary.	1	11	15	27
Ahmedabad	Victoria Jubilee Hospital for Women and Children.	1,553	13,497	245	15,295
Panch Mahals	Female Hospital	...	...	304	304
Karachi	Jaffir Fadoo Dispensary	.	(No figures)		.
Satara	Civil Hospital	.	.	27	27
Sholapur	Dufferin Hospital	156	9,714	137	10,007
	TOTAL	1,710	23,222	728	25,660

Burma.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Rangoon	Lady Dufferin Maternity Hospital.	1,215	9,981	...	11,196
	TOTAL	1,215	9,981	...	11,196

Central Provinces.

Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Jubbulpur	Lady Elgin Hospital	293	8,579	651	9,523
Nagpur	Dufferin Hospital	435	10,435	36	10,906
	TOTAL	728	19,014	687	20,429

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Saugor	Female Hospital	123	4,215	74	4,412
	TOTAL	123	4,215	74	4,412

Eastern Bengal and Assam.

Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Dhubri . .	Dhubri Hospital . . .		(Transfd. to Class B)		
Dacca . .	Dufferin Hospital . . .	51	5,423	287	5,761
	TOTAL .	51	5,423	287	5,761

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Gauhati . . .	Charitable Dispensary . . .	95	1,428	60	1,583
Dhubri . . .	" " . . .	54	1,500	88	1,642
Goalpara . . .	" " . . .	26	3,205	...	3,231
Comilla (Tipperah). . .	Faizanessa Zenana Hospital . . .	8	4,686	111	4,805
Jorbat . . .	Charitable Dispensary . . .	88	11,067	168	11,323
Harisal . . .	Female Hospital . . .	156	4,429	110	4,495
North Lakhimpur . . .	Charitable Dispensary . . .	"	...	42	42
Sunamganj . . .	" " . . .	"	1,719	56	1,775
Tezpur . . .	" " . . .	38	"	21	59
Dibrugarh . . .	" " . . .	...	3,337	28	3,365
Sibsagar . . .	" " . . .	...	...	20	20
Mangaldai . . .	" " . . .	...	(No figures)	...	...
Ajail . . .	" " . . .	"	"	4	4
Tura . . .	" " . . .	1	"	9	10
TOTAL . . .		466	31,171	717	32,354

Madras.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Madras . . .	Victoria Caste and Gosha Hospital.	2,533	16,981	...	19,514
	TOTAL .	2,533	16,981	...	19,514

Punjab.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Lahore . . .	Lady Aitchison Hospital .	941	4,836	643	6,420
Simla . . .	Dufferin Ward, Ripon Hospital.	189	4,493	20	4,701
Gujrat . . .	Female Out-door Department, Civil Hospital.	...	13,808	47	13,855
Delhi . . .	Victoria Zenana Hospital.	332	6,984	120	7,436
	TOTAL .	1,462	30,120	830	32,412

United Provinces of Agra and Oudh.

Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund,

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Fyzabad	Lady Dufferin Hospital	314	9,890	132	10,336
Cawnpore	Ditto	402	10,891	152	11,445
Meerut	Ditto	308	7,679	152	8,139
Saharanpur	Ditto	243	6,532	87	6,862
Benares	Ishwari Memorial Hospital.	1,276	19,756	244	21,276
Aligarh	Lady Dufferin Hospital	424	5,308	55	5,787
Farukhabad	Ditto	115	3,005	60	3,180
Lucknow	Dufferin Hospital (Lady Lyall Branch).	1,276	11,760	199	13,235
Agra	Lady Lyall Hospital	1,150	..	81	1,231
Do.	Lady Lyall Dispensary	..	13,531	..	13,531
Do.	Maternity Hospital	465	..	8	473
Allahabad	Lady Dufferin Hospital	577	10,334	264	11,173
Sitapur	Ditto	400	7,997	137	8,534
Pilibhit	Dufferin Fund Hospital	244	7,043	195	7,482
Bijnor	Dufferin Hospital	110	3,196	35	5,341
Do. (Nagina)	Ditto	66	3,731	55	3,852
Bahraich	Female Hospital	226	8,792	47	9,065
Bara Banki	Grigg Female Hospital	348	9,924	69	10,341
Gonda	Lady Dufferin Hospital	184	19,232	15	19,431
Gorakhpur	Female Hospital	320	5,551	125	5,996
Mirzapur	Dufferin Hospital	252	6,987	111	7,350
Kheri	Ditto	42	1,440	10	1,492
TOTAL		8,742	174,579	2,233	185,554

United Provinces of Agra and Oudh—*contd.*Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.
CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Ghazipur .	Female Hospital . .	506	9,120	56	9,682
Shahjahanpur .	Ditto . .	183	10,542	273	11,003
Benares .	Bhelupur Hospital . .	...	8,829	54	8,883
Rae Bareilly .	Dufferin Hospital . .	151	4,032	127	4,310
Lucknow .	King's Hospital . .	43	6,435	160	6,638
Agra .	Pipalmundi Dispensary . .	...	6,992	126	7,118
Do. .	Tajganj Dispensary . .	...	3,730	9	3,739
Do. .	Firozabad Dispensary . .	...	5,891	56	5,947
Budaun .	Zenana Hospital . .	297	19,973	328	20,598
Bulandshahr .	Mrs. Porter's Hospital . .	438	4,101	86	4,625
Etawah .	Female Hospital . .	128	4,797	67	4,992
Bareilly .	Dufferin Hospital . .	693	10,830	243	11,766
Muttra .	Ditto . .	124	6,643	39	6,806
Muzaffarnagar .	Ditto . .	176	4,806	43	5,025
Naini Tal .	Crosthwaite Hospital . .	180	5,152	391	5,723
Sultanpur .	Female Hospital . .	102	6,733	98	6,933
Fatehpur .	Dufferin Hospital . .	155	2,770	21	2,946
Partabgarh .	Ditto . .	155	5,130	36	5,321
TOTAL .		3,336	126,506	2,213	132,055

Native States (which now include the statistics returned by the Mysore Branch).

CLASS C.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Ulwar . .	Lady Dufferin Hospital . .	296	17,952	1,209	14,457
Oodeypur . .	Walter Hospital . .	147	2,068	100	3,215
Kotah . .	Victoria Jubilee Hospital . .	213	8,276	111	8,600
Kapurthala . .	Victoria Jubilee Hospital.	270	23,607	205	24,082
Patiala . .	Lady Dufferin Hospital and City Branch.	403	12,538	806	13,752
Jhind . .	Victoria Female Hospital, Sangrur.	10	3,442	14	3,466
Bhopal . .	Lady Lansdowne Zenana Hospital.	257	6,029	300	6,586
Tonk . .	Walter Female Hospital . .	274	9,140	274	9,688
Beawar . .	Female Hospital . .	66	11,459	102	11,627
Bahawalpur . .	Jubilee Female Hospital . .	327	9,266	133	9,726
Bharatpur . .	Maji Sahiba Darya Kaur's Female Hospital.	425	7,504	435	8,364
Bikanir . .	Main Dispensary, Bhugwandaa Hospital.	192	6,912	129	7,233
Jodhpore . .	Jaswant Hospital . .	194	4,889	...	5,083
Jeypur . .	Zenana Wards, Mayo Hospital.	780	13,286	210	14,276
Gwalior . .	Scindia's Hospital for Women and Children.	1,267	30,885	...	32,152
Rewah . .	Zenana Hospital . .	47	6,677	...	6,724
Travancore . .	Trivandrum Maternity and Women and Children's Hospital.	2,563	10,464	...	13,027
Ditto . .	Female side, General Hospital.	971	7,240	58	8,269
Ditto . .	Do., Fort Dispensary . .	...	3,074	...	3,074
Quilon . .	Victoria Hospital . .	502	3,826	71	4,399
Baroda . .	Jamnabai Hospital . .	...	12,181	...	12,181
Ditto . .	Jubilee Wards . .	256	...	...	256
Nahan . .	Zenana Hospital . .	6	6,722	225 ¹	6,953
	Carried over . .	5,173	169,830	4,228	179,231

Native States (which now include the statistics returned by the Mysore Branch)—*contd.*

CLASS C—*contd.*

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1909.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
	Brought forward	5,173	169,830	4,028	179,031
Rampur	Female Hospital	301	2,886	...	3,187
Rajkot	Rasulkhanji Hospital for Women and Children.	211	1,705	...	1,916
Hyderabad (Deccan).	Aliabad Dispensary	...	632	...	632
Ditto	Jalna	...	1,628	352	1,980
Ditto	Chadderghat Civil Dispensary.	...	15,525	...	15,525
Ditto	Residency Hospital	...	...	...	*
Ditto	Sultani Shahi	...	6,101	72	6,173
Ditto	Gulburga Civil Dispensary.	13	1,327	110	1,950
Ditto	Raichur Civil Dispensary.	4	4,740	60	4,804
Ditto	Zenana Wards, Afzalganj Hospital.	...	...	...	*
Ditto	Aurangabad Female Hospital.	32	4,109	94	4,235
Ditto	Hanam Konda Civil Dispensary.	12	1,050	44	1,106
Ditto	Maternity Hospital	333	...	...	333
Ditto	Victoria Zenana Hospital.	745	22,884	...	23,629
Jaora	Ditto	28	6,243	...	6,271
Karauli	Female Dispensary	30	3,392	...	3,422
Srinagar	Diamond Jubilee Zenana Hospital.	536	5,108	230	5,874
Bettiah	Dufferin Hospital	571	12,106	3	12,680
Darbhanga	Ditto	393	49,048	56	49,502
Bangalore	Victoria Hospital, Female Department.	828	38,984	...	39,812
Ditto	Maternity Hospital	961	12,805	27	13,793
Ditto	Lady Curzon Hospital	2,021	18,851	...	20,872
Mysore	General Hospital, Female Department.	...	9,774	218	9,992
Ditto	H. H. The Maharani's Hospital.	795	12,082	41	12,918
Kolar	Gold Fields Female Dispensary.	129	6,582	37	6,748
Ditto	Female Dispensary	4	14,304	130	14,438
Tumkur	Ditto	75	7,989	70	8,134
Hassan	Ditto	21	20,915	85	21,021
Shimoga	Ditto	...	6,656	42	6,698
Kadur District,	Ditto	87	10,000	...	10,087
Chikmagalur.	Ditto	...	9,294	42	9,336
Chitaldroog	Ditto	...	...	...	...
	TOTAL	17,606	521,457	6,095	545,158

* Patients now treated in the Victoria Zenana Hospital.

APPENDIX V.

Reports of certain Branches and Native States.

The United Kingdom Branch.

Patron:

HER MOST GRACIOUS MAJESTY QUEEN ALEXANDRA.

Patroness:

H. R. H. The PRINCESS of WALES.

President:

The DOWAGER MARCHIONESS of DUFFERIN and AVA, V. & A., C.I.

Vice-President:

Lady GRANT DUFF, C.I.

Executive Committee:

The MARCHIONESS of LANSDOWNE, C.I.
The Lady HELEN MUNRO-FERGUSON.
Lady LYALL.
Lady BAYLEY.
Lady (JAMES) LYALL.
Lady ELLIOT.
Sir PHILIP HUTCHINS, K.C.S.I.

Sir ANDREW SCOBLE, K.C.S.I.
Sir COURTNEY ILBERT, K.C.S.I.
Lady WENLOCK, C.I.
Sir T. W. HOLBURNESSE, C.S.I.
Surgeon-General Sir BENJAMIN FRANKLIN, K.C.I.F.
Sir WALTER LAWRENCE, Bart., G.C.I.F.

General Committee:

The Lady EDWARD CAVENDISH.
ALICE, COUNTESS of STRAFFORD.
SUSAN, COUNTESS of MALMESBURY.
The Lady ARTHUR RUSSELL.
The Lady WANTAGE.
The Lady EMMA CRICHTON, C.I.
The Lord BRASSBY, K.C.B.
The Hon. T. A. BRASSBY.
The Hon. H. DUDLEY RYDER.
Sir THOMAS FOWELL BUXTON, Bart., G.C.M.G.
Sir J. WHITTAKER ELLIS, Bart., M.P.
Lady BERNARD.
General Sir EDWARD CHAPMAN, K.C.B.
Sir THOMAS SUTHERLAND, G.C.M.G., M.P.

Sir EDWARD BRADFORD, G.C.B., K.C.I.F.
Sir ALFRED LYALL, K.C.B., G.C.I.F.
Sir W. MACKENZIE, M.D.
Mrs. ROWAN HAMILTON.
Lady ILBERT.
Mrs. SCHAUER, M.D.
Mrs. THORPE.
Sir H. C. STUBBS, K.C.I.
Lt-Colonel HARRY CROFT, M.C.
Mr. J. J. L. REEVE.
Lord STURGEON.
Surgeon-General FRANK.
Mr. H. T. STURGEON.
Mr. GEORGE WATSON.

Honorary Secretary:

DOWAGER MARCHIONESS of DUFFERIN and AVA, V. & A., C.I.

~~MISS~~

CHARLES ROBERT ELLIS

~~MISS~~

Mrs. C. J. ELLIS, C.I.

* It is desired that all orders for the purchase of the *Journal* should be sent to the Editor, coming to England to ~~be sent to the Editor~~ *be sent to the Editor*.
Subscriptions to be paid ~~in advance~~ *in advance*.

Annual Report of the United Kingdom Branch of the Countess of Dufferin's Fund.

I am sending my Annual Report in a shortened form this year, as owing to the loss by death of many old Subscribers, I am anxious to reduce all expenses connected with this Branch of the National Association for Supplying Female Medical Aid to the Women of India. Since my last report several of my oldest friends have passed away; amongst them, Louisa, Lady Goldsmid, Mrs. Achison Henderson, Lady Priestly, Lady Elgin, and Lord Ripon.

The Central Council Report for 1908 states that 2,248,000 women received medical aid during the year, that 52 fully-qualified Lady Doctors, 817 Assistant Surgeons, and 529 Hospital Assistants, besides a large number of Midwives and Nurses are employed in the different Provinces; while 640 Women are studying medicine in the various Medical Colleges and Schools.

Lady Minto has this year arranged for an official inspection of all the Hospitals under the Dufferin Fund, as it is felt that the time may have come for some new regulations to be made with regard to them. Miss Vaughan, M.D., has given her services for this purpose.

The United Kingdom Scholarships.

Miss Singha left for India on the 10th December, having successfully passed her professional examination in Edinburgh, and at the Coombe Hospital, Dublin. Miss Ricketts, Miss Patell, and Miss K. Reed continue their studies in this country, and two new scholars are to arrive in the Spring, Miss Brewster and Miss Ghose.

Miss Van Ingen, who receives a scholarship from the Central Fund, has passed the final examination of the Preliminary scientific Examination of the London University.

The Gilchrist Trustees continue their valuable grant of £150 for Scholarships in India.

I need not say how anxious I am to be able to continue the United Kingdom Scholarships which help so much to promote the object of the Fund, and by means of which so many residents of India have obtained full medical qualifications, and have returned to their own country to practice there. To do so it will be necessary to get some new Subscribers and I shall be most grateful to anyone who can help in this direction.

I desire to express my warmest thanks to all who continued their Subscriptions to this Fund.

HARRIOT DUFFERIN AND AVA.

Clandeboys, December 31, 1909.

Subscriptions.

	£ s. d.		£ s. d.
Mrs. Benson	1 0 0	Mrs. Lecky	1 0 0
Miss Bookley	1 0 0	Mrs. Loch	1 1 0
Colonel Sir E. Bradford	1 0 0	Lady C. Lyall, 1908-1909	2 2 0
Lord Brassey	3 3 0	Sir Alfred and Lady Lyall	2 2 0
Hon. T. Brassey	2 2 0	Sir J. B. Lyall	2 2 0
Lord Burnham	1 0 0	Miss Maconchy	0 10 6
General Sir Edward Chapman	0 10 6	Mrs. Percival Maxwell	2 0 0
Stanley Cochrane, Esq.	2 0 0	Miss Monk	3 0 0
Colonel Harry Cooper	1 0 0	Mrs. Moorhead	3 0 0
Mrs. Corry	1 0 0	Colonel Parry Nesbitt	1 0 0
Lady Emma Crichton	5 0 0	Sir Arthur Nicholson	2 2 0
Mrs. Darley	0 10 0	Lady D'Arcy Osborne	2 0 0
Miss Darley	0 10 0	Lady Plowden	0 10 0
Mrs. Home Dudgeon	1 0 0	Lady Priestley	2 2 0
Lady Grant Duff	3 3 0	Mrs. Quinn	1 0 0
Dowager Lady Dufferin and Ava	5 0 0	Mrs. Quinn	1 0 0
Countess of Elgin	2 2 0	Miss Ramsden	3 0 0
Sir W. Ellis	1 1 0	Marquis of Ripon	1 0 0
Mrs. Erck	0 10 0	Lady Reay	2 0 0
Mrs. Fowler	0 10 0	Mrs. Arthur Riall	1 0 0
Mrs. G. R. Hamilton (Dublin)	1 1 0	Lady Arthur Russell	1 0 0
Mrs. Rowan Hamilton	1 0 0	Duchess of Somerset	1 1 0
Robert Hardie, Esq.	1 1 0	Alice, Countess of Strafford	1 1 0
Achison Henderson, Esq.	10 0 0	Mrs. Strickland	1 1 0
Sir P. Hutchins and Lady	2 2 0	T. & M. W.	10 0 0
Misses L. and P. Jennings	1 0 0	Lady Wantage	10 0 0
W. B. Jones, Esq.	2 2 0		
Mrs. S. Kingan	2 0 0		
Marquis of Lansdowne	1 1 0		
			£110 3 0

Donations.

Grant from Gilchrist Trustees	150 0 0
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Statements of Accounts of the United Kingdom Branch of the Countess of Dufferin's Fund, from 1st January to 31st December 1909.

RECEIPTS.		EXPENDITURE.	
	£ s. d.		£ s. d.
Balance at 1st January 1909—		Scholarships—Miss Singha .	30 0 0
On Deposit with Bankers .	400 0 0	Miss Van Ingen .	24 0 0
Cash at Bankers, Current Account .	315 0 11	Miss R. Ricketts .	50 0 0
	715 0 11		104 0 0
Receipts—		Gilchrist Grant, remitted to Calcutta .	150 0 0
Subscriptions as per List .	110 3 0	Expenses—	
Interest on Deposit with Bankers .	6 5 3	Printing Reports .	2 14 6
Dividends on £1,874 Manchester Corporation 3 per cent. Stock .	53 3 6	TOTAL .	256 14 6
Grant from Gilchrist Trustees .	150 0 0		
Central Committee for Miss Van Ingen's Scholarship .	24 0 0	Balance at 31st December 1909—	
Refund of Income-tax on Dividends for period ending 5th April 1909 .	12 6 6	On Deposit with Bankers .	400 0 0
	355 18 3	Cash at Bankers, Current Account .	414 4 8
TOTAL .	1,070 19 2		814 4 8
		TOTAL .	1,070 19 2

THOMAS B. HENRY,
Chartered Accountant.

The 18th January 1910.

Sums received and expended from 1900—1909 by the United Kingdom Branch.

RECEIPTS.		EXPENDITURE.	
	£ s. d.		£ s. d.
Subscriptions and Donations, and Interest on Deposits and Investments, and Grant of £150 from Gilchrist Trustees, for the past ten years—		Expenditure on objects of the Fund—	
1900 .	404 17 8	1900 .	652 2 8
1901 .	421 12 3	1901 .	383 7 0
1902 .	394 4 0	1902 .	339 12 2
1903 .	447 11 6	1903 .	234 5 0
1904 .	405 17 11	1904 .	394 10 6
1905 .	375 16 4	1905 .	439 2 6
1906 .	353 0 0	1906 .	876 4 2
1907 .	625 17 2	1907 .	519 17 3
1908 .	387 13 1	1908 .	312 6 8
1909 .	355 18 3	1909 .	256 14 6

Baluchistan Branch.

Quetta.—The total number of patients treated in the outpatients' department at the Dufferin Zenana Hospital, Quetta, was 6,736, of which 1,444 were new, showing an increase of 132. There were 41 in-patients, against 38 of last year.

Six hundred and fifteen visits were paid to patients at their own homes by doctor, nurse, and dhais. The number of visits exceeded that of last year by 229.

Only 41 operations were performed during the year and the confinement cases attended to were 26, against 12 in 1908.

There cannot be much further progress until there is a larger and more suitable building. During the summer several patients had to be refused admittance as in-patients as there was no accommodation. There are only three beds, and with difficulty 14 patients were admitted during the year.

The Patel Ward at the Civil Hospital, Quetta, continues to form a most useful adjunct to the Civil Hospital, and this year there has been a gratifying increase of 75 in the number of patients admitted for treatment. On several occasions lack of accommodation has prevented the admission of patients, and seldom does any bed remain unoccupied for more than a day or two. Double the accommodation could be utilized, and as funds become available they could not be better expended than in the erection of a line of similar wards on

border for treatment.

MacIvor Female

of 595.

The Hospital is well attended by purdahnashin Hindus and Mohammadans; 79 operations including major and minor were performed during the year, against 103, besides which forty-nine obstetrical cases were attended, against 53, 5 being normal labour cases only.

Two pupils passed out in the Dai class, and the Political Agent, Sibi, Mr. Dobbs, in order to encourage the dais, got an allowance sanctioned for one of the dais for a year and a half, until she gets into practice, at the same time appointing her as sole midwife of 5 villages.

The Ziarat villages were visited as in other years. Mrs. Archer, who has taken a great deal of interest in this hospital since it started, paid all the travelling expenses in the absence of Lady MacMahon, who had gone to England.

New quarters were built for the compounder at Ziarat, and it is to be hoped that quarters will be built for dais and indoor patients next year.

The Dispensary Fund continues to be supported by provincial revenues, Municipal

at the Dufferin Hospital

patients from December 1908 to the 8th May 1909, when Miss A. M. Watts, L.R.C.P. & S., etc., was appointed and took charge of the hospital.

In all 5,731 patients were treated, against 4,907 in the previous year, showing an increase of 824. The number of new patients admitted was 2,368. Of these, 773 were treated during the time the Hospital Assistant held charge, and 1,595 after the arrival of the Lady Doctor. Ten in-patients were admitted since May 1909.

As regards town and country people, there were 1,347 of the former and 1,021 of the latter. The country people are not strictly Purdah, whereas the town people are, and consequently during the absence of a Lady Doctor the figures were country 499, and town 274; now they are country 522 and town 1,073. Of the 274 town people the majority were children and probably the few Purdah women who received medical aid were represented by their husbands. There were 58 operations, mostly minor, against 51 during the previous year.

Malarial fever and eye diseases are the most common, and next follow digestive, skin and respiratory diseases.

There were 116 cases of diseases special to women, and it is interesting to note that during the absence of a Lady Doctor there was not a single such case treated.

The figures given above go to show that the Institution is doing good work and making steady progress, and that female medical aid is both needed and appreciated by the Purdah community. There is scope for more operation work, especially in connection with women's diseases, but unfortunately the more serious operations cannot be undertaken as the Lady Doctor has no assistance, and is working single-handed.

Every effort has been made to get a compounder but without success. The hospital is very well provided with medicines and surgical instruments.

Mysore Branch.

There is an increase of 3,585 in the total number of patients treated when compared with the number treated during last year.

Of the pupils under training last year, *vis.*, (i) Catherine, (ii) Abisheganadan, Mary Louis, (iv) Kaveramma, and (v) Ruth Prasada, the first two, four and five were examined after they finished their course and were found qualified. No. 3 Mary Louis joined on 18th July 1908, but she resigned on 5th January 1909, and she was at her own request permitted to re-join and she finished her course and her examination is being arranged.

Four other pupils, *vis.*, (i) Arokiamary, (ii) McGuire, (iii) Kallianiammaul, and (iv) Mary Paul, have been taken on as pupil midwives during the year; of these, (i) Arokiamary is in her eighth month of training, (ii) McGuire is in her sixth month of training, (iii) Kallianiammaul is in her fifth month of training, and (iv) Mary Paul—this pupil studied for six months at her own expense at first and has been afterwards granted a stipend for the remaining six months on the recommendation of the Medical Officer, and as such she is now in her seventh month of training.

The accounts of the fund were last audited in 1905 and those from 1st December 1905 to 30th November 1909 covering a period of four years were taken up for audit this year. This audit of accounts was entrusted to Mr. J. S. Chakravarti, M.A., F.R.A.S., Comptroller to the Government of Mysore, at the Committee's request, who has very willingly taken up this work.

NATIVE STATES.

Rajputana.

Jodhpur.—Miss J. Marsh, M.D., was in charge of the Jaswant Hospital for women up to 6th May 1909, when on being relieved by Female Hospital Assistant Mrs. Elias, she went on 6 months' leave to England. There were 194 in and 4,889 out-patients treated, against 240 in and 4,649 out-door patients in 1908, an increase of 194, probably due to malaria after the rains.

against 36 major and 328
due to absence of the Lady
November 1909.

Alwar.—Miss V. A. Turkhud, M.B., B.Sc., was in charge of the Lady Dufferin Hospital till the 14th February 1909, when she resigned, and was relieved by Female Hospital Assistants Bala Bai and Sugna Bai. Miss J. Canagasaby, L.R.C.P. & S., was appointed to the Hospital from the 13th April 1909, and is still in charge. There is a decrease of 1,194 in the attendance of both in and out-patients, and in the operations performed as compared with the previous year, which is attributed to the fact that the Hospital was under repairs for nearly three months, and that there was no Lady Doctor for two months during the year.

absence of Rampriary, resigned.

Colonel Crooke-Lawless inspected the Hospital on behalf of Her Excellency Lady Minto. **Udaipur.**—Miss McGlashan, M.B., Ch.B., was in charge of the Walter Female Hospital up to 22nd September 1909, when she went on special leave for three months and the work of the Hospital during her absence is being carried on by Female Hospital Assistant Sitabobai.

There were 147 in, and 2,968 out-patients treated, against 150 in, and 2,612 out-door patients in the previous year, and 100 patients were visited at their homes, as compared with 50 in 1908, this increase it is hoped means that Purdah women patients may in time take more advantage of the presence of female medical aid.

There were 22 major and 92 minor operations performed, against 23 major and 83 minor in the previous year.

Her Excellency Lady Minto inspected the Hospital on 3rd November 1909.

Kotah.—Miss J. Newton, L.R.C.P. & S., has been in charge of the Victoria Female Hospital throughout the year. There was a considerable increase in the number of out-patients treated in the hospital, due to malarial fever after the rains. Seventeen major and 275 minor operations were done, against 42 major and 287 minor operations in 1908.

Sixteen maternity cases were treated, against 13 in the previous year, of which 2 were premature, two contracted pelvis, 1 abortion and 11 normal.

A new operating table for the Hospital was provided during the year.

Female Hospital Assistant Miss Helen Baldeo Singh is popular and liked by the women of Kotah.

Tonk.—Female Hospital Assistant Rosie Joseph was in charge of the Walter Female Hospital till April 1909, when Miss K. Reed returned from England and resumed charge of the Hospital. She has obtained the degree of L. R. C. P. & S., Edinburgh, L. F. P. Tonk and has

5,943 out-
probably due

to malarial fever after the rains. 274 patients were visited at their homes, against 119 in the previous year.

There were 64 major and 288 minor operations performed, against 115 major and 193 minor in the previous year.

Bharatpur.—Female Hospital Assistant Bibi Rup Kunwar has been in charge of the Bharatpur Female Hospital throughout the year. 425 in and 7,504 out-patients were treated in 1909, against 392 in and 7,539 out-patients in 1908.

Karauli.—Female Hospital Assistant Mrs. Annie Williams was in charge of the Female Hospital till the 16th September 1909, when the institution was closed as the Municipality is not in a position to afford the up-keep. There was an attendance of 3,422 in and out-door patients, against 3,805 in the previous year.

Jaipur.—Miss L. E. Sykes, M.D., has been in charge of the Female ward of the Mayo Hospital throughout the year. There was an increase of 2,332 attendance in both in and out-door patients and in those who were visited at their homes, which is due to the fact that there is now a qualified Lady Doctor in charge who takes personal interest in her patients.

A new female Compounder has been added to the Staff and the nursing is now entirely in the hands of women.

Bikaner.—Female Hospital Assistant Mrs. Elizabeth Moji Ram has been in charge of the Female Wards of the Bhagwan Dass Hospital throughout the year. There was a decrease of 782 in both in and out-door patients and those visited at their homes, as compared with the previous year, which is due to the fact that the Female Hospital Assistant was absent on leave on account of ill-health for 3 months and 24 days during the year.

There were 103 major and 897 minor operations performed, against 116 major and 642 minor in 1908.

Beawar.—The female ward of the Charitable Dispensary has been in charge of Female Hospital Assistant Mrs. J. Martin throughout the year. There were 66 in, and 11,459 out-door patients treated, against 70 in and 11,465 out-door patients in 1908. 102 patients were visited free at their homes, as compared with 60 in the previous year.

Ajmer.—A Female Hospital Assistant has not yet been appointed to the Female wards of the Victoria Hospital, for want of funds.

Hyderabad.—The Victoria Hospital for Women, which was damaged by the floods of 1908, has recovered to a great extent, has regained its popularity, and is expected to soon be in full working order. The Maternity, Surgical and other blocks have almost been completed and the establishment has been largely increased by His Highness's Government recently to meet the additional requirements.

The number of patients since the 1st January last was 23,529, of whom 7,509 were in-patients, including maternity cases. 219 operations were performed, excluding midwifery operations which amounted to 159. The cases treated were almost exclusively purdahnashins, who are coming in in increasing number as they realize that this hospital is exclusively for women. Two blocks only of this group of buildings are being worked at present : but it is hoped that the others will soon be fully equipped and staffed.

Good work continues to be done in the Maternity Hospital which is located within the premises of the Victoria Hospital.

Chadarghat.—*Dispensary, Zenana Department.*—The report is for eleven months. Miss Edith Boardman took over charge on the 23rd May 1909. A total of 15,515 patients were treated, against 9,603 for ten months the previous year, or an average of 1,411 per mensem, against 960, showing an increase of 451.

99 operations were performed, many of the women who resort to this Dispensary for treatment belong to well-to-do families and they buy their own medicines outside.

Sultan Shahi.—*Dispensary, Zenana Department.*—The total number of new patients treated was 6,173, against 6,031 of the last year, of these 72 were treated at home, and 33 operations were performed.

The patients took some time to return to the Dispensary after the flood, as most of them had lost either friends, land or property, and the Lady Doctor's short transfer to Amin Bagh was another bar to a fuller attendance.

Aurangabad.—*Dispensary, Zenana Department.*—The total number of out-patients during the year is 4,100 and in-patients 32, 3 major operations and 75 minor were performed.

Nine labour cases were admitted in hospital, *vis.*, Caesarean Section 1, forceps 3, complex labour 2, and natural 3. 6 dais were entertained in the midwifery class, 1 left on account of ill-health and the 5 others were sent to Hyderabad for practical study.

A large in-patient ward fitted for midwifery cases is a great need here as many of the people from outlying stations, seek medical aid here and especially destitute women (labour cases), and for which I have to encroach on the male department for such urgent cases, the present in-patient ward being too small and ill-ventilated.

Hanamkonda.—*Dispensary, Zenana Department.*—The total number of out-patients treated during the year 1909 is 1,094, of which number 44 were treated at their own homes. The in-patients were 12 in number. A few minor operations were performed. Nine obstetric cases were conducted during the year. Eight in the homes of the patients and one in hospital. This was a case of puerperal eclampsia, who died an hour after delivery.

There being no proper in-patient ward is very inconvenient for patients.

Jalna.—*Dispensary, Zenana Department.*—The increase of 1,530 on the total number of patients this year is owing to the lady doctor's presence in the dispensary for the whole of the year.

There is no provision yet for the accommodation of in-patients.

Rajchur.—*Dispensary, Zenana Department.*—The total number of patients treated in 1909, was 4,804, against 2,891 last year, an increase of 1,913.

75 minor operations were performed, all of which were successful. Nine obstetric cases—two being podalic versions, 3 forceps, and three natural, and one placenta praevia. Free visiting 60.

Travancore and Cochin.

Trivandrum.—*Maternity and Women and Children's Hospital.*—The total number of patients shows a slight decrease of 189 in the out-patient Department. This small decrease has been observed for the past two years, and arises from a Government order that no medicines are to be given unless the patient is seen in person at the time of prescribing. The order operates severely in many cases.

Obstetric work increases steadily each year. The number of cases attended in the past 12 months was 316, being the highest on record.

The number of major operations performed was 299. This includes 75 major obstetric operations and 7 abdominal sections. The minor operations numbered 508.

A new temporary ward was added to the hospital during the year. An upstairs ward is to be divided into two private sitting rooms for the apothecaries on duty, and for the Nursing Sisters on their arrival. Three European Nursing Sisters (*sœurs de charité de gand*) arrived a few days ago, and have just entered upon their duties. Their addition to the hospital staff is a most acceptable one, and will add considerably to the welfare of the patients and of the hospital.

Four additional midwives have also been posted to the hospital. They have all passed comparatively recently out of the midwifery class of Quilon. Three are Native Christians and one a Eurasian.

The death is reported of the hospital writer. He is said to be a great loss to the Institution, as he worked well, and was unobtrusive and quiet in his manner. His vacancy has been filled by Miss Louisa Croning, the work of the hospital being thus entirely done by women, except for a peon, gardener and two watermen.

Trivandrum.—*Female side, General Hospital.*—The accommodation for in-patients is insufficient. Female patients are often accommodated in the verandahs and a large number has had to be refused admission.

The hospital has no obstetric ward attached to it. 58 cases of labour were attended to in the homes of patients.

63 Gynecological cases were admitted as in-patients, and in 14 cases operations, such as ovariectomy hysterectomy, curetting and dilatation were performed successfully.

The out-patient Department provides no separate accommodation for female patients. This has limited the number of admission. It is hoped that this will be remedied in the coming year.

Trivandrum.—*Female side, Fort Dispensary.*—There has been a decrease in the year in the number of women treated. This is due to a Government circular requiring patients to present themselves personally at the dispensary.

The institution is much used by the women in the neighbourhood. The services of the midwife is often utilized by women during their accouchment, as evidenced by the increase in the labour cases attended by her.

Quilon.—*Victoria Jubilee Hospital.*—In the beginning of the year under report the Hospital was in charge of Miss Watts, who resigned in April. Doctor Lakshmanan held temporary charge till Miss C. L. Kohlhoff was appointed in May. This hospital is reserved entirely for maternity and gynecological cases. Of new admissions, there were 502 in-patients and 3,897 out-patients during the year, against 487 and 688, respectively, the previous year,—an increase of 3,224. 71 maternity cases were treated in their own homes.

A dispensary was opened on the 26th May, and before its opening the few out-patients were all gynecological cases, whose prescriptions were made up at the dispensary of the district hospital.

There were 161 major operations during the year, of which 50 were obstetric and 3 abdominal sections. Government have sanctioned the erection of an operation theatre and a septic ward,

The staff continues the same as last year, with the addition of two trained midwives. There are ten pupil midwives under-training, 8 of them stipendiary and 2 private.

Central India.

Bhopal.—*Lady Lansdowns Hospital.*—Mrs. F. D. Barnes, M.D., took over charge on the 23rd April 1909. Hospital Assistant Sharifan Bai, who was appointed in November 1908, had been carrying on the work for two months under the supervision of the Agency Surgeon.

Mrs. Grange, the matron who was appointed in October 1908, has done splendid work both in hospital and among the maternity cases in the city. The nursing staff have improved much under her tuition.

Agnes Paul has been in charge of the dispensary, and under her is a class of girls being taught practical compounding.

Out of a class of four dais being trained under the Dufferin Fund, one died of phthisis, two were found incompetent, and one passed with credit at the end of twelve months.

A new wing has been added to the hospital, providing a much felt need in a modern operation room, a labour room and a store room. One of the detached wards was converted into residential quarters for the Hospital Assistant, and a suite of rooms was built for the Compounder. A bungalow within the hospital grounds was built for the matron, Mrs. Grange, who has up to now occupied one of the upper wards of the hospital.

The number of patients increased somewhat during the year (2,419), but owing to the presence of workmen in the hospital since May, the number of in-patients has not been what it ought to have been, nor have the better class of purdah women come for treatment. This it is hoped to attain as soon as the workmen leave the hospital. Operations in consequence have not exceeded last year's returns, but it is hoped to have a more interesting report for 1910.

The training of a class of about 30 girls in general nursing and compounding, together with the important training of a class of 30 hereditary dais has added greatly to the matron's and the lady doctor's work, but Her Highness the Begum has promised an assistant matron who will help in this branch of the work.

Gwalior.—There were 1,267 in and 30,885 out-patients treated in the Female Hospital during the year, an increase of 3,869 over the previous year. One hundred and seventy-one major operations were performed, among them being 6 Laparotomies, 2 for ovarian tumours, 2 Porro's operations for extreme contraction of pelvis, 2 for obstruction of the bowels, 20 operations for cataract and 17 obstetric operations. The maternity classes numbered 66. During the Viceregal visit last November Her Excellency Lady Minto visited the hospital and seemed pleased with the general working arrangements.

Jaora.—Miss R. McVan continues in charge of the Victoria Zenana Hospital.

There were three major operations, one craniotomy and two embryotomies. The minor operations number 104 and the daily average attendance was 48.

There is an increase of 576 patients during the year over last year.

Rewah.—A short report on the work accomplished in the Zenana Hospital shows that there has been a total increase of 764 patients treated over the number treated last year. The minor operations performed were 239 in number, and one case of delivery by forceps was undertaken.

Miscellaneous.

Baroda.—The number of out-door patients at the Jamnabai Dispensary was 12,181, against 12,631 in the preceding year. The in-door patients at the Jubilee ward were 256, against 220 in the previous year.

There is a decrease of 451 in the out-door patients, and an increase of 36 in-door patients. Major operations 95, minor 445, obstetric case 1.

One trained midwife attends obstetric cases amongst the poor in their own houses.

Rampur.—Miss J. A. Vaughan, M.B., B.S., took over charge of the Zenana Hospital on January 15th, 1909. On her recommendation the following changes were made.

A European matron was appointed: adding greatly to the efficiency of the hospital, especially as regards cleanliness, order, and method of nursing. The services of a qualified female compounder were obtained, reducing the danger of mistake in dispensing drugs.

Two dais, one fully certificated, have replaced two of the original staff. This has produced the good results in the treatment of city maternity cases.

Instruments to the value of £29 have been added to those already in hospital, thus facilitating surgical work. A white marble floor and white tiled dado have been placed in the operation room and a bath room has been built for the patients. Two sanitary latrines have been erected, and the pre-existing structures demolished. Iron screens, dividing a ward into 8 divisions, have been removed, making one large airy ward. The hospital was much in need of lockers, tables and beds; these have been supplied.

Out-patients, new, for 8 months, 2,886, against 7,515 for the preceding year.

In-patients, 301, against 282.

It would appear that the number of patients during the 8 months under report are proportionately less than those reported last year; this is due, probably, to the fact that the entries in the register were frequently made by the dais, and therefore the total is not reliable. The out-patient register has since been accurately kept, and the gradually increasing number of the out-patients indicate that the work has increased.

There is a decided increase in the in-patients, but as the register previous to last March was conjointly kept by the male and female hospitals, it is difficult to differentiate exactly the number of females treated by each hospital.

Chloroform has been administered thirty-three times.

The major operations number 24, including removal of ovarian cyst. Minor operations 70.

9 obstetric cases have sought admission to hospital; 8 were abnormal cases, and required operation, resulting in a maternal mortality of 1.

The hospital dais have attended several maternity cases in the city, and each is visited at least once by the lady doctor or the matron.

Kapurthala.—The present report by Miss G. M. F. Pereira, M.D., draws attention to the great increase of the work in all the Departments of the Victoria Jubilee Hospital. The total number of in and out-patients rose from 21,935 to 24,082. The operations, too, have increased. Sixty-seven major and 916 minor operations were performed. Hitherto the surgical work was much handicapped for want of an operating room. A very good one was built during the year, well lighted from the top and three sides, and the verandah floor has been inlaid with brick and cement. The compound walls have been raised three feet on two sides. This makes the hospital more private.

61 maternity cases were treated in the hospital and town, more than half of these were abnormal cases. Efforts are being made to have a few semi-detached cottages built in the hospital compound for Purdah ladies. Ajij Begum left early in the year and Sultan Bibi has been appointed in her place. This woman is working satisfactorily. The rest of the staff continues the same.

Srinagar.—The number of patients treated in the Diamond Jubilee Zenana Hospital during the year is 536 in-patients and 5,108 in the Out-patient department, against 484 and 5,082, respectively, in 1908, and 230 patients were treated in their own homes during the year. A new dispensary was opened in the most populated part of the city, in October, in a house rented for the purpose. This is a great boon to the women, and much appreciated by them.

120 maternity cases were treated in their own homes by the hospital staff during the year, and 25 in the Hospital.

There were 600 operations during the year; it is interesting to note that of the 5 porros operations the babies were all born alive and all the mothers made good recoveries.

The staff have all worked satisfactorily during the year. Miss Smith the Staff Nurse, resigned her post in October and has been replaced by Miss Shepherd.

A hut for the chowkidars which was very much needed has been built during the year, and some godowns adjoining the hospital compound are being turned into quarters for the dais. This will be a great improvement, as owing to want of rooms for the dais they have had to live outside at much inconvenience to themselves and to their work.

Rajkot—The number of out-patients treated in the Rasulkhanji Hospital during the year under report was 1,705, as against 1,480 of the last year.

The number of in-patients treated during the year under report was 211, as against 137 of the preceding year.

Nurse Christina Milligan has resigned her appointment owing to her marriage, and Miss Caroline Francis has been appointed in her place.

Two house surgeons, Miss Ghose and Miss M. Ram, were appointed during the year under report; they have successively resigned. Miss E. A. Taylor has been appointed as House Surgeon from October 1st, 1909.

Patiala.—The work at the Dufferin Hospital has been subject to several interruptions, partly owing to ill-health of members of the staff, and partly owing to the lady doctor's absence in Chal attending to Her Highness the Maharani.

During the early part of the season the work was carried on by Miss Sohan Lal. Later in the year, she being on leave, Miss Pinto superintended the Hospital, and the Hendley Female Dispensary was necessarily left to a Compounder.

The number of patients treated has been about the same as last year.

Mrs. Dass joined the staff as Head Compounder in September, the post having been vacant for some time.

In the Lady Curzon School examinations were held in April and November in midwifery, reading and nursing. Twelve dais passed in midwifery, two in reading and five in nursing.

The Lady Minto gold medal was awarded to Deoki Dai. A good many dais have been sent out from the Lady Curzon School during the year to cases in the city and some for longer periods to distant parts of the state.

The class for compounders has been carried on throughout the year. It was at first in charge of a male compounder, but Mrs. Dass has now taken over the teaching from him. Three students attend, of whom one went up for her examination this year. The result is not yet known.

The Institutions continue to be much appreciated, as the large attendance shows, especially at the Lady Dufferin Hospital. But the work has been carried out under great difficulties on account of the unusual ill-health among the lady doctors. Great credit is due to them for the effort they made to carry on when they were far from well.

It is very difficult to fill up temporary vacancies among the female staff, and therefore it is very creditable to them to be able to show such good results under the circumstances.

The 806 patients visited at their homes have all seen by the Lady Superintendent herself. By an oversight those visited by the other lady doctors were not entered in the register, and therefore the number cannot be stated. This defect will be remedied in future.

Bahawalpur.—The Jubilee Zenana Hospital has been throughout the year in the charge of Miss Z. E. DaCosta, L.R.C.P.S. and L.M., assisted by a female staff. Strict purdah arrangements were maintained in the hospital. Purdah women of the middle classes have not only commenced attending as out-door patients, but have often willingly entered

the in-door wards. Though the year was comparatively healthy, owing to less malarial fever, the statistics supplied show only a slight decrease in the new out-door patients, but the total number shows an increase of 6,015 visits, compared with that of the last year. Miss DaCosta takes a keen interest in her work and has made herself popular among the different classes of people. The senior compounder left in September last, and her place has been taken by Miss Henry, who is working satisfactorily. The assistant compounder is a Muhammadan resident of Bahawalpur and observes purdah. She has learnt the work well and the lady doctor speaks highly of her. The dais have learnt to be clean and aseptic. Of the three pupils one died last year, and one was transferred after two years training to Ahmadpur, where she is doing good work. Their places have been taken by two pupil dais resident of the State.

The out-door patients numbered, new, 9,266, old and new, 31,684, and purdah women 2,381.

In-door patients, new, 327, purdah women, 103.

Maternity cases in Hospital 15, outside 15.

Nahan.—The total number of out-door attendance in the Zenana Hospital was 31,037, showing a daily average of 85.03. The new patients treated being 6,953, against 7,534 during the previous year, showing a decrease of 581, due chiefly to the subsidence of malaria owing to sanitary improvements.

Forty-seven operations were performed, of these the major operations were 2 for cataract, 2 for stone and 2 for unnatural labour.

The new buildings provided by Her Highness having been completed, have been used from the beginning of July last. It has a commodious central courtyard, surrounded by medical, surgical and maternity wards, an operation theatre and other rooms; providing an accommodation for 14 in-patients and for treating out-door patients as well. Quarters are also provided for compounders and other subordinates close to the building, with a nice bungalow for the lady doctor.

The staff remained as heretofore and worked satisfactorily. The question of having a trained midwife, for the benefit of the public, is engaging the attention of the Durbar.

Jhind.—The report on the Victoria Zenana Hospital, at Sangrur, is very brief. It only states that the total number of patients treated during the year under review was 3,466, as against 2,961 during the preceding year,—an increase of 505.

The Victoria Memorial Scholarships Fund.

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(During the year 1909).

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The Victoria Memorial Scholarships Fund.

THE main objects of the Victoria Memorial Scholarships Fund, initiated by the late Lady Curzon in 1901-2 with the object of keeping in perpetual remembrance the sympathetic interest taken by the late Queen-Empress in the domestic troubles of the women of India, have already been duly explained in previous reports, and before the progress which has been achieved during the past year is set forth, the Committee thinks it advisable to again repeat what has already been written regarding the definite nature of the scheme.

treatment of child-birth in India can
it of being followed concurrently, and

- (1) to train up midwives of a superior class;
- (2) to endeavour to impart a certain amount of practical knowledge to the indigenous midwives (*dais*).

The former course, which is that followed in the main by the Dufferin Fund, presupposes a certain standard of education among the women who are trained. They must be able to read and write, and be capable of understanding lectures and studying simple text-books. It is, therefore, out of the question, until the number of educated women in India has very greatly increased, that the number of highly trained midwives should be anything but infinitesimally small in relation to the demand for their services. Such midwives, moreover, receive relatively large salaries and charge high fees; most of them belong to classes more or less out of touch with the customs and traditions of the people, and their sphere of action is limited by these considerations. Lady Curzon therefore decided that the proceeds of her appeal should be devoted to carrying out the second of the two courses mentioned above. This she believed to be an entirely new departure. It proceeds on the principle of making the best of actual facts and existing agencies, and endeavouring gradually to improve them. The general idea is to get hold of as many as possible of the *indigenous hereditary midwives* and induce them to attend at Dufferin Hospitals, or at the female divisions of ordinary hospitals or dispensaries, for the purpose of acquiring such empirical knowledge as it is possible to impart to them. In comparison with the training of the regular midwife class, the amount of such knowledge will be very small; but the women themselves, or some of them, would start with a certain practical acquaintance with the subject and will probably learn quickly. Even if at first only negative results are obtained, and the trained women merely abandon or discourage insanitary practices, the gain will be great. In time they will learn more, and whatever

they learn will spread over a far wider area than can be reached by means of the superior class of midwives. The teaching will at first be oral, and will be conveyed in the colloquial language familiar to the pupils. And in order that this should be carried into effect, short and simple primers of midwifery practice in the various vernaculars have been prepared for the use of *dais*. In many of the classes reading and writing are being taught to enable the pupils to refer to these books. Much of the teaching will be committed to memory, and will tend to popularise the improved methods which will be taught to the *dais*.

In order to give effect to these principles, the objects of the Fund have now been defined to be:—

- (1) To train midwives in the female wards of hospitals and female training schools in such a manner as will enable them to carry on their hereditary calling in harmony with the religious feelings of the people, and gradually to improve their traditional methods, in the light of modern sanitation and medical knowledge.
- (2) Scholarships to midwives will vary according to circumstances and locality.
- (3) When desirable, qualified female teachers, who understand the vernacular, will be sent to outlying districts, and fees will be paid to midwives who attend a course of elementary instruction.
- (4) Funds for the above purpose will be granted, as far as possible, according to the interest received on the sums raised in each locality.

As long ago as the fourth century, *A.D.*, India possessed in the *Susruta Samhita*, a treatise on midwifery which a well-known specialist describes as a "thoroughly rational system of medico-surgical teaching based upon accurate observation of nature." The same writer refers to the barbarous character of the modern treatment of childbirth in India, and observes:—"The degradation of the art of midwifery among the Indians to so low a stage must be ascribed in part to the caste prejudices of the people." The proposals sketched above are, in effect, a revival of the most ancient tradition and practice in India, and as such have received enthusiastic support from all patriotic Indians. Although the Fund was only started eight years ago the Committee is glad to report that its aims and objects are evidently warmly appreciated throughout the country by Indians of all classes.

As was stated in the report last year, considering the very short time that efforts have been made for the better training of the indigenous *dais*, the Committee has no reason to be discouraged at the limited success which has attended its efforts in certain parts of the country. The difficulties with which it has to contend continue to be numerous, and extraordinary superstitions, caste prejudices, and ignorance have all to be overcome in carrying out the objects of the scheme.

The reports for the past seven or eight years have all borne testimony to the extraordinary difficulties which have to be overcome with regard to the training of the hereditary *dais*, as well as that of the ordinary midwife.

It has to be remembered that only a very small percentage of Indian women are to-day able to read or write, and all the reports state that the general ignorance of the women who attend the classes in various parts of the country is the main stumbling block which has to be overcome.

For instance the census of 1901 showed that only one female in 144 in India could read and write. Of the females aged 15 years and over only eight in a thousand were literate. According to the statistics of 1907 the total number of girls in schools of any kind was 6,45,000, and according to the customary modes of reckoning, this is 36 per cent of the girls of school age. From these figures it will be seen that the ignorance of the *dais* when the local Committees endeavour to train is indeed great.

In some parts of India ladies of the highest family still prefer the methods of the hereditary *dai* to those of the qualified lady doctor, and the fear of losing their practice still prevents many of the ignorant *dais* from accepting scholarships, and from attending classes where they have opportunities of learning modern ideas. Some *dais* indeed consider themselves as more than proficient, and regard any offer of teaching in the nature of an insult, while others oppose all European principles, and obstruct the lady doctors who would improve their knowledge in every possible way.

The actual period during which women should be retained in classes for study varies largely throughout the country. The Central Committee (for various reasons has not deemed it wise to prescribe any uniform period of instruction, and Provincial and local centres use their own discretion in issuing rules on this subject. While some classes are held for three months, others continue for three years.

The value of scholarships offered to women as inducements to attend classes also varies in a somewhat remarkable manner, and this question is also left to the discretion of local Committees.

Infinite patience must therefore be continued to be exercised before much real progress is made in improving a highly backward and often entirely illiterate class of women. Referring to the necessity for patience Miss Trewby, M.D., writes from Amraoti.—“The movement is a most excellent one, but one must exercise the greatest patience before any appreciable results can be seen. If we have to wait 20 or 30 years before these are obtained it will be nothing in a country like India. Do not let us be like children digging up seeds to see why they do not flower.” On the other hand there are undoubted indications that gratifying results are being obtained in more than one direction.

In Bengal, where 17 classes were in operation the reports from some civil surgeons show that the services of passed *dais* are being appreciated, but it is also stated that it will take years to convince people of the dangers of

employing untrained *dais*. The classes at Calcutta, Nadia, Darjeeling and Dharbungha have proved the most successful.

The most satisfactory reports of progress are sent in by the Punjab, the United Provinces, Bhopal, Gwalior, Mysore and Rajputana.

From Ludhiana in the Punjab Miss Edith Browne, the Principal of the Northern India Medical School, reports that whereas the indigenous *dais* showed distrust and reluctance to allow the lady doctor to watch cases with them, they are now eager to learn western methods and voluntarily send for the assistance of the lady doctor in difficult cases.

In Bhopal Her Highness the Begum has taken special interest in the scheme, and herself sent for all the hereditary and indigenous city *dais* and explained at the palace the whole method of western science and a class of 30 *dais* was immediately started.

At Gwalior where 38 *dais* are under training, 781 cases were attended by certificated *dais* during the year. Colonel Smyth writes from Mysore:—"There was a larger number of applicants for scholarships than we had funds to entertain."

Since the formation of the Victoria Memorial Scholarships Fund, 1,025 *dais* have passed through a regular course of training, and of this number 124 were instructed during the past year; 287 women are now stated to be attending classes in various districts in India.

The Committee is much gratified at these encouraging signs, and it hopes that local branches will continue to forward schemes for consideration whereby they think the usefulness of the Fund may be increased.

During the year, Miss K. O. Vaughan, M.B., and Major G. T. Birdwood, M.D., inspected forty-two centres in the United Provinces, Bengal, and the Central Provinces in many of which the training of *dais* is being carried on, and their reports on the subject have been communicated to the centres concerned.

The special elementary "Manual of Midwifery" for the use of midwives in receipt of scholarships from the Victoria Memorial Scholarships Fund, which was composed at Lady Curzon's desire by Lt.-Col. C. P. Lukis, M.B., I.M.S. continues to be found of considerable service. The book which contains an introduction by Surgeon-General Sir B. Franklin, K.C.I.E., formerly Director General of the Indian Medical Service, is published by Messrs. Thacker, Spink & Co. Many hundreds of copies have been distributed to a large number of centres and schools of instruction, and arrangements have been made for its translation into the vernacular of the various districts engaged in the teaching of midwives. It has already been translated and published in Urdu, Hindi, Gujarati, Marathi and Bengali, while its translation into Tamil, Telugu, Malayalam and Burmese has been arranged by the provincial centres concerned. A proposal has recently been made to issue an illustrated edition in Kanarese at the expense of the Mysore Government, and in Roman Urdu by the Patiala State. Applications for copies of this Manual in English,

Urdu, Hindi, Marathi, Bengali or Gujarati should be made to the Secretary, Viceroy's Camp.

The financial statement appended to this report shows the income and expenditure of the Fund for the year under review. The opening balance was Rs. 3,724 and the closing balance Rs. 548 debit. The interest on investments during the year amounted to Rs. 28,821.

The expenditure on grants-in-aid towards the objects of the Fund amounted to Rs. 29,118, and the working expenses to Rs. 3,975, which includes a sum of Rs. 1,500 in connection with the new office building in Simla.

The actual sum which has been received in donations and subscriptions since the inauguration of the Fund is Rs. 6,91,000; the interest accruing on this investment, about Rs. 28,500 is distributed to the various centres whence it has been received, and the financial statement shows the proportion in which the income has been apportioned.

Her Excellency the Countess of Minto and the Executive Committee desire once again to express their warm acknowledgments to all those ladies and gentlemen who have rendered such valuable assistance in organising and carrying on this special branch of female medical aid to the women of India.

Her Excellency the Lady President much regrets the retirement of Sir Herbert Risley and Surgeon General Sir G. Bomford from the Executive Committee, and desires to place on record the extremely valuable services which both these members have rendered to the Fund for many years.

The following brief extracts from the report which have been received Local Centres. from the various Districts and Native States where branches of the Victoria Memorial Scholarships Fund have been established, indicate the main difficulties which the Local Committees have to contend with, as well as the progress which has been achieved during the past year:—

Lieutenant-Colonel W. A. Sykes, D.S.O., I.M.S., the Honorary Secretary Baluchistan. of the Baluchistan Centre, again forwards the annual reports on the Quetta and Sibi classes:—

Quetta.—Miss E. M. Cardozo, L.R.C.P. & S., states:—"The two *dais*, Louisa and Rebecca, with whom the *dai* class was opened in Quetta on February 15th, 1907, passed out with honours on March 31st, 1909. They were examined by Dr. S. G. Stuart, of the Zenana Mission Hospital. Louisa *dai* got 155 out of 175 marks, and Rebecca 145 out of 175. The two are now practising in the Bazaar. But Rebecca has lately been taken on the Dufferin Hospital Staff in place of Rufan *dai* who, to my great regret, died in November of pneumonia.

"The new *dai* class was opened on April 1st, 1909, with three pupils: one however resigned after a fortnight as her sight was defective and another resigned after two months owing to family troubles. There is now only one pupil *dai* in training. She is intelligent, steady and capable and will I am sure do as well as Louisa and Rebecca."

Sibi.—Miss A. Alfred, L.M.S., says that:—"Three *dais* were in training in 1907-1909. In March 1909, two of them Mrs. Cape and Hyatan bibi passed their examination with credit and received certificates, but the third Khannue, though she knew her practical work, failed in theoretical knowledge. She was however given a chance for further training of three months, but before I received the orders she left the Hospital. The Political Agent and Extra Assistant Commissioner, *Sibi*, in order to encourage *dais* class, have appointed Hyatan *dai*, sole midwife of five villages, and have fixed her charges. They have also given her an allowance at the rate of Rs 8 per mensem for five months, and Rs 5 per mensem for another year. After that it is hoped that she will get into practice in those villages, as she is known to the people, and it is trusted that her better methods preferred by them. Mrs. Cape was the hospital dispenser and she continues to work on as such.

"Two new *dais*, Halima and Sumri have been in training since May 1909. The former is an indigenous *dai*, sent by one of the Sirdars to be trained for his village. Both of them seem to take great interest in their work."

Colonel R. Macrae, I.M.S., Inspector-General of Civil Hospitals, writes of the position in Bengal:—"There were 17 *dais*' classes in operation in as many districts against 18 in the previous year, *vide* the statement attached. The classes at Puri, Singhbhum and Balasore were not continued: at Puri, because the hospital was under reconstruction, and at Singhbhum and Balasore for want of pupils. The class at Darbhanga was re-opened, and a new class was started at Darjeeling for the training of hill women in nursing and midwifery. It is reported to be doing good work, and these women after a good training should prove of immense service among the hill people, who have little or no medical aid of any kind to rely on.

As has been observed before, the chief drawback to the success of a *dai* class is the difficulty experienced in securing suitable pupils notwithstanding the offers that are made of high stipends in addition to promises of substantial rewards on passing the examinations. The public is still apathetic which accounts for the fluctuations in the number of classes which it is difficult to keep going from year to year in the same place. It will take years to convince the people of the dangers of employing untrained *dais*. Reports are now being received however from some Civil Surgeons that the services of the passed *dais* are being appreciated.

The total number of successful *dais* was 32 against 33 in the previous year. *Dais* trained at the Calcutta Dufferin are not taken into account as there are no separate Victoria Memorial Scholarship Fund *dais* there. Sixteen passed *dais* were presented with the Central Committee's certificate, and 7 were rewarded with money to purchase necessary articles for the practice of their profession; 237 *dais* have in all been trained since the formation of the branch.

The classes at Cuttack, Nadia, Darjeeling and Dharbanga were the most successful last year and turned out between them more than half the number of passed pupils. The Calcutta, Cuttack, Nadia, Darjeeling and Berhampore classes, though no pupil passed out from the latter last year, are the best in Bengal, and reflect credit on the medical officers in charge of them. Repeated efforts to open classes at Burdwan, Ranchi, Palamau, Manbhum, and Singhbhum have so far failed.

The total receipts of the *dais*' classes for the year under report amount to Rs. 4,850-9-8; of which the sum of Rs. 2,139 was paid from the Victoria Memorial Scholarships Fund at my disposal. The yearly grant to the Calcutta Dufferin Hospital has, since June last, been raised to Rs. 330 and Rs. 564 was granted to it last year: Rs. 88 was given to meet the cost of rewards to passed *dais*, Rs. 100 and Rs. 50 to reward the Lady Doctors in charge of the Murshidabad and Cuttack classes respectively for good service in this connection, Rs. 15 to start a new class at Kandi, Rs. 150 for purchasing models for the Darjeeling class, and the rest was given for stipends to pupils at Muffasil stations.

The enclosed statement furnishes details of the work done, and the financial position of the classes.

Work is proceeding smoothly at Dacca in Eastern Bengal and Assam as will be seen from the following extracts from the report of Colonel R. M. Campbell, I.M.S., the Inspector-General of Civil Hospitals:—

Eastern
Bengal and
Assam.

"At Dacca, during the year 1909, there have been 5 *dais* undergoing training and these will, in June next, be examined and if qualified, granted certificates. One of these *dais* is entirely supported by the Lady Dufferin Fund which makes a grant of Rs. 7 per mensem. The other *dais*, 4 in number, receive Rs. 4 per mensem from the Municipality and District Board and Rs. 3 from the Lady Dufferin Fund. The Lady Dufferin Fund also made a grant of Rs. 100 to this class for purchase of diagrams

"One *dai* passed the qualifying examination and received a certificate.

"The Dacca District Board makes a grant of Rs. 25 per mensem and gives free quarters to each of two certificated *dais* one stationed at Munshiganj and Manickganj, and the Narayanganj municipality grants Rs. 25 per mensem and free quarter to one for Narayanganj. These *dais* at the sub-divisions are attached to the hospitals there and assist in the hospital daily in addition

hoped that it may

be possible to start a *dai* class there.

The usual reports for Berar are forwarded by Mr. A. D. Chitambar, the Honorary Secretary, who reports:—

"At the end of the previous year there were 5 pupil *dais* under training in the *dai* class at Amraoti, and three of them passed the examination held by the Civil Surgeon and the Lady Doctor during the year under report.

"Of the annual grant of Rs. 625 received from the Central Committee, Rs. 525 were retained for the Amraoti *dai* class, and Rs. 100 were paid to

the Akola *dai* class to which the Central Committee also kindly contribute annually a separate grant of Rs300. There were 4 pupil *dais* in that class at the beginning of the year, one of them after having studied for four months went on leave but did not return after the expiry of her leave. The remaining three passed the examination. Owing to plague the new class was not started till October last, when it was opened with 5 pupil *dais*.

"As observed in the last year's report, it is difficult to obtain pupils for training from the indigenous midwives. The opinions of the Lady Doctor and the Civil Surgeon, Amraoti, were obtained on the subject and the matter was considered by this Branch Committee at their meeting held on the 5th September last, when the following resolution was passed: "Resolved unanimously that further efforts should be made to induce indigenous midwives, Manguis and Maharins, particularly young girls, to attend the training class, and that Miss Trewby be authorised to give them an allowance not exceeding Rs8 per mensem. The total amount of expenditure should not exceed Rs25 per annum. If the indigenous midwives of this class cannot be obtained, then other candidates may be accepted."

This is followed by reports by Miss L. Trewby, in charge of the Dufferin Hospital, Amraoti, Captain J. C. S. Oxley, I.M.S., and Mr. M. D. Pillay, Honorary Secretary of the Akola Centre.

Miss Trewby reports :—

"During the year under consideration 5 *dais* have been trained all of whom were of the indigenous *dai* class.

"The movement is a most excellent one, but one must exercise the greatest patience before any appreciable results can be seen. If we have to wait 20 or 30 years before these are obtained, it will be nothing in a country like India.

"Do not let us be like children digging up their seeds to see why they don't flower. At the same time I think it is a good thing to keep the Fund for those for whom it was first intended, *viz.*:—"Those who will attend *any one*, regardless of caste, in confinement, and during their lying in, and will do everything for them."

"It will be better not to fill up the Dufferin midwife posts from the Victoria Memorial class. The Dufferin midwives are trained separately and differently, and it will be better to keep the posts for those trained as Dufferin midwives. One of the things one has to contend against is that the indigenous *dais* cannot understand the gravity of their profession, and they will not wait for the confinements, but are ready to rush off to any other work. I speak now of those who have already for years been doing *dais* work. One woman took a spell off for several months in order to sell fruit. Two others, the only *dais* in a large village, work in the fields, and are present at the confinements if they chance to be in the village. It will be a good thing when people realize that it is worth while to pay their *dais* decent fees.

"Three *dais* were examined and passed by the Civil Surgeon and Lady Doctor. Another *dai*, had not the rule of two years training been enforced, could have passed in her first year."

Captain Oxley writes :—" I quite agree that only the indigenous *dais* who naturally attend labour cases in their own villages should be taken for training.

" Other women who wish to learn anything about nursing can get instruction at Nagpur or elsewhere, but the Victoria Memorial Fund is not intended for them.

" I scarcely think that the indigenous *dai* in a small village would earn enough to keep herself entirely by professional fees, even if these were considerably larger than they actually are.

" I think that in course of time much good will be effected if, however unpromising the material may seem to work on, the proper *dai* class only is taken on. I do not approve of any other women being taught. If the right class cannot be obtained here it would be better to save the money than to expend it on objects for which it was never intended."

Mr. Pillay writes :—" At the beginning of the year December 1908, there were four paid students in the midwifery class, one of these having studied for four months went home on leave as some relation of her was ill. She did not return after her leave expired, and thus there were left only three students who were presented for examination after having completed the full course of studies for six months. They were examined by the Civil Surgeon on the 28th January 1909, and I am glad to say they all passed. One of them, Mrs. Sitabai, who came first in the examination was given a special award as recommended by Colonel MacRae, I.M.S., Inspector-General of Civil Hospitals, Bengal. Certificates of proficiency, signed by the Civil Surgeon and the Honorary Secretary, were granted to all students who passed during the last two years, at a meeting of the Managing Committee held on the 5th of September 1909.

" After the dismissal of this class a new class was intended to be immediately started, but as we were in the midst of plague, we found it difficult to secure an adequate number of women. This we were able to do only in October, and the new class was opened on the 25th of that month with five students, 3 belonging to Moratha Kunbi, 1 Brahmin, and 1 Barber castes.

" We were sorry to lose our old class teacher Mrs. Anandibai Kalele, who left the town as her husband was transferred to another place, but we have been able to secure in her place Mrs. Annapurnabai Gokhale, wife of the Sub-Registrar here. She has passed as midwife in the Dufferin Hospital, Nagpur, Central Provinces, and was awarded a silver medal for her proficiency.

" We are much obliged to the municipality of Akola for allowing us to hold the class in a room in the Town Hall free of rent. Five meetings of the Managing Committee were held during the year. The members continue to be the same as in the previous year and the Honorary Secretary paid five visits to the class during the year under report."

As regards Burma, the conditions are peculiar and correspond little Burma with those of India. The classes there have not so far

indigenous *dai*, and special attention is therefore given to the training of other women. The new Honorary Secretary, Mr. H. W. Watts, remarks in a brief report that:—

"The pupils are Burmese, Karens and a few Eurasians. As there is no training of native *dais* here as in India, the Central Committee authorised the Victoria Memorial Scholarship Fund to be spent on the training of midwives and sick-nurses in this Hospital, and the funds are a great help in meeting the expenses of the training of these women."

— The organisation of the Fund in the Central Provinces has been placed on a more satisfactory footing during the year under report, Mr. G. Sherlock Hubbard, Honorary Secretary, in his annual report shows that:—

"During the year 9 *dais* were passed out under the Victoria Memorial Scholarship Fund, namely, 5 at the Bowie Hospital, Hoshangabad, and 4 at the Harda Dispensary. The working of the Fund at the Elgin Hospital, Jubbulpore, has not been very successful. On the 1st of January 1909 there were four women in training. Of these three were Basores and one Hindu Brahman. In February 1909, however, the class was closed as the pupils were not only unpunctual in their attendance, but were too illiterate to retain the knowledge imparted to them. The Commissioner, Jubbulpore Division, states that there are a number of Kurmi women in Jubbulpore who act as midwives among the better class of Hindus, and that he has made an attempt to form a class for these but so far without success.

"The system of employing male Hospital Assistants in the training of midwives has now been discontinued, and in future none but qualified females will be employed for the work. The Commissioners of Divisions were addressed with a view to the possible retention of the operations of the Victoria Memorial Scholarships Fund in their Divisions. The replies received from them are not very hopeful, and there seems to be but a small chance of any successful operations. Further enquiries have nevertheless been instituted with a view to ascertaining whether the training of *dais* cannot be arranged for at Bilaspur and Seoni, and also at the Mure Memorial Hospital in Nagpur."

— The following information has been received from Madras regarding the training of midwives in that Province:—

"Ten midwifery pupils are now being trained, three at the Government Maternity Hospital, and seven at the Raja Sir Ramasamy Mudaliar's Maternity Hospital. The training of Native midwives was commenced in 1887 and since then 124 have passed out. Of these 88 are employed by Local Bodies. No reliable information concerning the remainder is available, but no doubt some of them are performing useful work in the remote villages of the districts.

"No difficulty has been experienced in obtaining pupils for these classes and in addition to those stipended by the Fund, a number of pupils are undergoing training at the expense of Local Boards. Those stipended by the Fund receive Rs 8 per mensem. Of the 14 pupils who at the end of last year

were still undergoing training, 12 have passed out successfully. Of the latter, 8 have found employment under Local Boards and 4 are practising privately. Of the 10 now undergoing training, 4 are Hindus, 5 are Native Christians and 1 of the Barber caste."

The progress in the Punjab continues to be satisfactory as will be seen from Punjab. the following report received from Colonel T. E. L. Bate, C.I.B., I.M.S., Inspector-General of Civil Hospitals :—

"During the year 1909, classes for the instructions of *dais* were continued at Lahore, Ferozepore, Ludhiana, Ambala, Simla and Delhi. The Rawalpindi class having been unfavourably reported on was discontinued for practically the whole year, but re-started on the 1st of November 1909, the women composing the class all being women of the Punjab practising as *dais*. At Amritsar another of the centres where *dais* have hitherto been instructed the class was closed on the resignation of the instructress, and sanction to re-start the class was accorded last December.

"Of the *dais* under instruction at the Lady Aitchison Hospital, Lahore, three were successful in passing their examination.

"From Ferozepore Dr. Allen reports very favourably of the progress made. All the members of her class are able to read and write and take an intelligent interest in this work. Two of the women are high caste Hindus, and are likely on passing, to be employed by the better class Hindu families. These two, with one other, are expected to go up for their examination in March 1910.

"At Ludhiana there are two distinct classes at work; one composed of Christian Hindu and Mohammedan women, who are undergoing a two years' course of training, and the other consisting of indigenous *dais* undergoing short courses of three months' instruction. Of the former, there are 23 on the roll, five of whom entered for the *dais*' examination of the Lahore Medical School last March and passed successfully. There are fourteen in the indigenous *dai*-class, eleven of whom passed an examination held by the Civil Surgeon at the end of the second course. Dr. Edith Browne, the Principal of the Northern Indian Medical School for Christian women, reports that, whereas formerly the indigenous *dais* showed distrust and reluctance to allow the lady doctor to watch cases with them, they are now eager to learn western methods and they voluntarily send for the assistance of the lady doctor in difficult cases. Four of the five *dais* under training at Ambala belong to the indigenous class, and each has a good practice. They are Mohammedans but practise among all classes. They value their training and they now appreciate the need of cleanliness, and readily send for the lady doctor in case of need.

"The class at Simla started with twelve women, but three left. Before joining the women had done a little maternity work in their villages, otherwise they were illiterate and utterly ignorant and devoid of professional knowledge. They were under training for eighteen months. Patie-

Indigenes, and special attention is therefore given to the training of natives. The new Honorary Secretary, Mr. H. W. Watts, remarks in a recent report that:-

"The pupils are Barmers, Khatris and a few Puntians. As there is training of native midwives as in India, the Central Committee authorised the Victoria Memorial Scholarship Fund to be spent on the training of midwives and to contribute to the Hospital, and the funds are a great help in meeting the expenses of the training of these women."

The Honorary Secretary of the Fund in the Central Provinces has been placed on leave since June 1909 during the year under report, Mr. G. Sherlock has been the Honorary Secretary. In his annual report shows that:-

"During the year a class were passed out under the Victoria Memorial Scholarship Fund, namely, 5 at the Bowle Hospital, Hoshangabad, and 4 at the Hindu Dispensary. The working of the Fund at the Elgin Hospital, Jabalpur has not been very successful. On the 1st of January 1909 there were ten women in training. Of these three were Barmers and one Hindu Brahman. In February 1909, however, the class was closed as the pupils were not only unpunctual in their attendance, but were too illiterate to retain the knowledge imparted to them. The Commissioner, Jabalpur Division, states that there are a number of Khatmi women in Jabalpur who act as midwives among the better class of Hindus, and that he has made an attempt to form a class for these but so far without success."

"The system of employing male Hospital Assistants in the training of midwives has now been discontinued, and in future none but qualified females will be employed for the work. The Commissioners of Divisions were addressed with a view to the possible retention of the operations of the Victoria Memorial Scholarships Fund in their Divisions. The replies received from them are not very hopeful, and there seems to be but a small chance of any successful operations. Further enquiries have nevertheless been instituted with a view to ascertaining whether the training of *daies* cannot be arranged for at Bilaspur and Seoni, and also at the Mure Memorial Hospital in Nagpur."

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"No difficulty has been experienced in obtaining pupils for these classes and in addition to those stipended by the Fund, a number of pupils are undergoing training at the expenso of Local Boards. Those stipended by the Fund receive RS per mensem. Of the 14 pupils who at the end of last year

were still undergoing training, 12 have passed out successfully. Of the latter, 8 have found employment under Local Boards and 4 are practising privately. Of the 10 now undergoing training, 4 are Hindus, 5 are Native of the Barber caste."

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"During the year 1909, classes for the instructions of *dais* were continued at Lahore, Ferozepore, Ludhiana, Ambala, Simla and Delhi. The Rawalpindi class having been unfavourably reported on was discontinued for practically the whole year, but re-started on the 1st of November 1909, the women composing the class all being women of the Punjab practising as *dais*. At Amritsar another of the centres where *dais* have hitherto been instructed the class was closed on the resignation of the instructress, and sanction to re-start the class was accorded last December.

"Of the *dais* under instruction at the Lady Aitchison Hospital, Lahore, three were successful in passing their examination.

"From Ferozepore Dr. Allen reports very favourably of the progress made. All the members of her class are able to read and write and take an intelligent interest in this work. Two of the women are high caste Hindus, and are likely on passing, to be employed by the better class Hindu families. These two, with one other, are expected to go up for their examination in March 1910.

"At Ludhiana there are two distinct classes at work; one composed of Christian Hindu and Mohammedan women, who are undergoing a two years' course of training, and the other consisting of indigenous *dais* undergoing short courses of three months' instruction. Of the former, there are 23 on the roll, five of whom entered for the *dais*' examination of the Lahore Medical School last March and passed successfully. There are fourteen in the indigenous *dai* class, eleven of whom passed an examination held by the Civil Surgeon at the end of the second course. Dr Edith Browne, the Principal of the Northern Indian Medical School for Christian women, reports that, whereas formerly the indigenous *dais* showed distrust and reluctance to allow the lady doctor to watch cases with them, they are now eager to learn western methods and they voluntarily send for the assistance of the lady doctor in difficult cases. Four of the five *dais* under training at Ambala belong to the indigenous class, and each has a good practice. They are Mohammedans but practise among all classes. They value their training and they now appreciate the need of cleanliness, and readily send for the lady doctor in case of need.

"The class at Simla started with twelve women, but three left. Before joining the women had done a little maternity work in their villages, but otherwise they were illiterate and utterly ignorant and devoid of professional knowledge. They were under training for eighteen months. Patient

indigenous *dais*, and special attention is therefore given to the training of other women. The new Honorary Secretary, Mr. H. W. Watts, remarks in a brief report that:—

“The pupils are Burmese, Karens and a few Eurasians. As there is no training of native *dais* here as in India, the Central Committee authorised the Victoria Memorial Scholarship Fund to be spent on the training of midwives and sick-nurses in this Hospital, and the funds are a great help in meeting the expenses of the training of these women.”

Central
Provinces.

The organisation of the Fund in the Central Provinces has been placed on a more satisfactory footing during the year under report, Mr. G. Sherlock Hubbard, Honorary Secretary, in his annual report shows that:—

“During the year 9 *dais* were passed out under the Victoria Memorial Scholarship Fund, namely, 5 at the Bowie Hospital, Hoshangabad, and 4 at the Harda Dispensary. The working of the Fund at the Elgin Hospital, Jubbulpore, has not been very successful. On the 1st of January 1909 there were four women in training. Of these three were Basores and one Hindu Brahman. In February 1909, however, the class was closed as the pupils were not only unpunctual in their attendance, but were too illiterate to retain the knowledge imparted to them. The Commissioner, Jubbulpore Division, states that there are a number of Kurmi women in Jubbulpore who act as midwives among the better class of Hindus, and that he has made an attempt to form a class for these but so far without success.

“The system of employing male Hospital Assistants in the training of midwives has now been discontinued, and in future none but qualified females will be employed for the work. The Commissioners of Divisions were addressed with a view to the possible retention of the operations of the Victoria Memorial Scholarships Fund in their Divisions. The replies received from them are not very hopeful, and there seems to be but a small chance of any successful operations. Further enquiries have nevertheless been instituted with a view to ascertaining whether the training of *dais* cannot be arranged for at Bilaspur and Seoni, and also at the Mure Memorial Hospital in Nagpur.”

Madras.

The following information has been received from Madras regarding the training of midwives in that Province:—

“Ten midwifery pupils are now being trained, three at the Government Maternity Hospital, and seven at the Raja Sir Ramasamy Mudaliar's Maternity Hospital. The training of Native midwives was commenced in 1887 and since then 124 have passed out. Of these 88 are employed by Local Bodies. No reliable information concerning the remainder is available, but no doubt some of them are performing useful work in the remote villages of the districts.

“No difficulty has been experienced in obtaining pupils for these classes and in addition to those stipended by the Fund, a number of pupils are undergoing training at the expense of Local Boards. Those stipended by the Fund receive Rs8 per mensem. Of the 14 pupils who at the end of last year

were still undergoing training, 12 have passed out successfully. Of the latter, 8 have found employment under Local Boards and 4 are practising privately. Of the 10 now undergoing training, 4 are Hindus, 5 are Native Christians and 1 of the Barber caste."

The progress in the Punjab continues to be satisfactory as will be seen from the following report received from Colonel T. E. L. Bate, C.I.E., I.M.S., Inspector-General of Civil Hospitals :—

"During the year 1909, classes for the instructions of *dais* were continued at Lahore, Ferozepore, Ludhiana, Ambala, Simla and Delhi. The Rawalpindi class having been unfavourably reported on was discontinued for practically the whole year, but re-started on the 1st of November 1909, the women composing the class all being women of the Punjab practising as *dais*. At Amritsar another of the centres where *dais* have hitherto been instructed the class was closed on the resignation of the instructress, and sanction to re-start the class was accorded last December.

"Of the *dais* under instruction at the Lady Aitchison Hospital, Lahore, three were successful in passing their examination.

"From Ferozepore Dr. Allen reports very favourably of the progress made. All the members of her class are able to read and write and take an intelligent interest in this work. Two of the women are high caste Hindus, and are likely on passing, to be employed by the better class Hindu families. These two, with one other, are expected to go up for their examination in March 1910.

"At Ludhiana there are two distinct classes at work; one composed of Christian Hindu and Mohammedan women, who are undergoing a two years' course of training, and the other consisting of indigenous *dais* undergoing short courses of three months' instruction. Of the former, there are 23 on the roll, five of whom entered for the *dais*' examination of the Lahore Medical School last March and passed successfully. There are fourteen in the indigenous *dai* class, eleven of whom passed an examination held by the Civil Surgeon at the end of the second course. Dr. Edith Browne, the Principal of the Northern Indian Medical School for Christian women, reports that, whereas formerly the indigenous *dais* showed distrust and reluctance to allow the lady doctor to watch cases with them, they are now eager to learn western methods and they voluntarily send for the assistance of the lady doctor in difficult cases. Four of the five *dais* under training at Ambala belong to the indigenous class, and each has a good practice. They are Mohammedans but practise among all classes. They value their training and they now appreciate the need of cleanliness, and readily send for the lady doctor in case of need.

"The class at Simla started with twelve women, but three left. Before joining the women had done a little maternity work in their villages, but otherwise they were illiterate and utterly ignorant and devoid of professional knowledge. They were under training for eighteen months. Patient

teaching has much improved them, and they now recognise the value of cleanliness. Last September the class was examined by the Civil Surgeon, and eight out of nine passed successfully. A new class of nine *dais* was started in October 1909. At Delhi there are four *dais* on the roll, all of whom are indigenous, but none are yet ready for examination."

United
Provinces.

Lieutenant-Colonel G. F. A. Harris, I.M.S., the Officiating Inspector-General of Civil Hospitals, United Provinces, forwards the usual local reports from the several districts concerned.

Benares.—Miss J. George, L.R.C.P. & S., in charge of the Dufferin Hospital, writes:—

"We have 3 *dais* in training in receipt of scholarships. One of these replaced a pupil who had to be dismissed for want of application and serious neglect in her duties. The instruction the *dais* receive is not sufficient, and a well qualified nurse to superintend their work would be a great advantage. We trust to arrange this and then we hope later to turn out more efficient workers. I and my subordinate staff have not the time to instruct the *dais* sufficiently, but the best that can be done under existing circumstances in the way of instruction is given them. The little details however of asepsis which would be supervised by a careful matron or nurse are often overlooked by my subordinate staff in charge of normal labours, and it is these normal labours which we wish our *dais* to be most efficient in, as their work lies here when they pass out and go into the city on their own responsibility. There have been 132 admissions in hospital and 31 cases have been attended to by the staff outside, besides these I have been called to examine 17 cases in the city previous to delivery. Out of the 132 admissions there were 58 normal labours as against 38 last year, this is an appreciative fact: all the others were either operations or abortions, miscarriages, and premature births, etc. We are not making progress in our admissions, the numbers should increase every year, and I can only account for the fact that there is a want of proper care and supervision to attract the patients to come in. I have found great neglect in the care of patients by the pupil *dais*, but they can hardly be blamed when proper supervision is wanting and they are here to learn. I hope our results will be better next year when a qualified matron is on our staff, and I look forward to this appointment."

On this the local Honorary Secretary remarks as follows:—

"It would be an advantage if the Hospital could obtain a qualified matron to supervise the nursing arrangements, but as this is a matter involving a considerable recurring expenditure as well as some immediate outlay on quarters, etc., it will be placed before the Local Committee during the ensuing year."

Lucknow.—Lt.-Col. J. J. Pratt, I.M.S., the Civil Surgeon, reports: "At the opening of the year there were two native *dais* under training; these were Sharifan and Ammi Bi. Sharifan *dai* passed out in March last and is now practising in the city. Ammi Bi *dai* completed her course of study and

passed a satisfactory examination in November 1909. She is still working in the Hospital but only temporarily. Imtia Bi was admitted as a *dai* in place of Sharifan on March 16th, 1909, and is doing her work well.

"In order to further the objects of the Fund, the Central Committee has been pleased to sanction, the admission of a third *dai*, and a grant of Rs 5 per mensem as a teaching allowance for the permanent Hospital Assistant.

"Sirdar Bi was admitted on March 1st, 1909, as the third *dai*, but was sent away on account of ill-health on May 15th, 1909, her place being taken by Nasir *dai* who is doing her work fairly satisfactorily. Anvia *dai* has been appointed since Ammi Bi passed her examination.

"Lectures are given weekly to the *dais* by Miss Nathaniel the senior Hospital Assistant. Their clinical work is constantly supervised by the Assistant Matron, and they conduct maternity cases in the presence of the Lady Doctor or Matron. The local administrative committee of the Fund consists of the Civil Surgeon, Mrs. Saunders, and Miss O'Brien, Lady Doctor, as Secretary."

Allahabad.—Miss K. Bonnar, L.R.C.P. & S., the Lady Doctor at the Dufferin Hospital, writes as follows :—

"At the beginning of the year there were two women in the class, Makboolam and Lachmin, the former passed the final examination successfully, and is doing good work in Allahabad. Lachmin had to be dismissed as she was found unsuitable. In their places we now have Sahodra a Hindu Brahmin and Maikkee Mahomedan, both are respectable women and seem promising.

"As these women have just joined and are inexperienced, they have not done much work outside. They attend the usual classes in midwifery and conduct labour cases in Hospital under supervision. A munshi teaches them Hindi and English reading and writing, besides which they get a general training in medical and surgical nursing and compounding. Since this class was opened in September 1902, 7 women have passed out, and more would have been trained, had we not been obliged to dismiss some of them after several months training. I find it more difficult to get respectable Mahomedans than Hindus. Since joining these two women have already witnessed 55 cases, but are too inexperienced as yet to be trusted to conduct cases on their own account. Of the cases they have witnessed, 41 have been normal cases of labour, and 14 have been abnormal. In addition to their hospital work they are taken out in turn by Mrs. Paul, midwife, to gain further knowledge in conducting cases in private houses.

"These two women receive a monthly stipend of Rs 10 each. In addition Rs 5 per mensem is paid respectively to the Female Hospital Assistant who lectures daily to them, and to the Munshi who teaches them Hindi and arithmetic."

Cawnpore.—Report by Major Young, I.M.S., Civil Surgeon :—Parbati *dai* was under training at the Dufferin Hospital all last year. She has

been regular and very attentive to her duties, and is beginning to conduct ordinary normal cases under supervision at the Hospital.

Jagdai *dai* was obliged to leave in December on account of ill-health. As she was not very promising we were not very keen to have her back. Mami *dai* was put in her place, she seems quite willing, and is eager to please, and though rather slow at her work, I hope in time she will turn out a good *dai*.

Agra.—Report by Major H. A. Smith, I.M.S., Civil Surgeon :—Eight *dais* were under training with the Lady Superintendent up to 30th September 1909.

This class was trained by Mrs. Hawes. In September 1909 her work was found unsatisfactory and unreliable, and the registers of cases attended kept by her were found inaccurate. The result was that Mrs. Hawes was allowed to resign her appointment, and the class was paid up and closed from 1st October 1909.

A fresh scheme for conducting the class has been submitted. On receipt of sanction and on finding a suitable women for the post of Lady Superintendent, and good accommodation for her in the city, the class will be started again.

Rs.3,300 were received during the year through the Inspector-General of Civil Hospitals, United Provinces, and the expenditure incurred was Rs.1,709-13-0.

Bhopal.

Mrs. F. D. Barnes, M.D., the Superintendent of the Lady Lansdowne Hospital, sends the following interesting and encouraging record of the year's work in this centre :—

The Bhopal Branch of the Victoria Memorial Scholarship Fund, has endeavoured to achieve the main object of the association by working their Branch on the two main lines suggested by the association, *viz.* :—

- (1) To train up midwives of a superior class.
- (2) To endeavour to impart a certain amount of practical knowledge to the indigenous *dais* and midwives.

The training of a superior class of women was started as far back as 1899 and this class has since continued. Since the inauguration of the Victoria Memorial Fund, four women yearly have been trained, and these women have been paid from an allowance received yearly from the Trustees of the Victoria Memorial Scholarship Fund.

In 1908 four women were entertained in this class, but during the course of the year two of these were found unfit for the training, and one developed phthisis and died, and only one woman appeared for the examination which she passed with great credit, receiving the diploma of the class.

This year I have received permission through the Agency Surgeon in Bhopal to take six women into the class, as a great demand exists in the district dispensaries for trained midwives. These six women receive daily instruction

in midwifery, attend cases in the city with the passed midwives of the Hospital, and receive instruction in general hospital duties in the wards.

Shortly after I took over charge in April 1909, I ascertained that the indigenous *dais* of Bhopal, of whom there is a large number, were through ignorance doing untold harm to perturant women, and the death rate was much higher than it need have been in these cases. Two or three very painful cases were brought to hospital, the result of ignorant and inhuman treatment from these *dais*, and I brought the subject to Her Highness Nawab Sultan Jehan Begum's notice. She entered very fully into the matter with me, and after a discussion on the points the scheme presented, suggested the formation of a class and sent for all the hereditary and indigenous *dais* of the city to the palace, including all the very old women whom it would have been next to useless to train. Her Highness, with wonderful tact, put the whole scheme of training on western methods before them, and with the inducement of a monthly payment of Rs 3 each, a class of 30 hereditary *dais* was started. These women come to hospital daily and receive tuition respectively from the Lady Doctor and Nursing Superintendent, on alternate days, but as the number of maternity cases coming to the hospital is small, I thought out a scheme whereby the practical knowledge to be imparted to the women could be secured. On the Lansdowne Hospital staff are four trained midwives, and I have arranged with the hereditary *dais* that as soon as one of them is called up to a case she must communicate with my nursing superintendent who sends one of our trained women free of charge to superintend the case. At first a great deal of opposition was met, but as the women gain confidence in us, and see that we do not intend to deprive them of their practice and fees, the work progresses, and I have to report since the class started on the 22nd July 1909, 248 confinement cases have been conducted practically under our supervision. The nursing superintendent visits each case on the third day to report progress to me, and we have both been frequently called to see cases when the trained nurse has thought our advice necessary. This is always given gratis, and the work started by Her Highness, without whose personal interest we should have had no success in the initiation of the class, promises to exceed our highest expectations.

The working of the scheme has needed considerable tact, and we have sometimes required the assistance of the police to verify the returns of births and deaths when some of the older women, who have not entered the training class, still operate. These "outside women" if I may so call them, have off and on tried to dissuade the public from allowing our *dais* to superintend cases, but a little notice from the police sent judiciously, that such conduct may eventually end in the forcible cessation of their practice has had the desired effect.

From the report of the Chief Medical Officer of the Gondal State it will be seen that there were two *dai* pupils remaining on the rolls, and one was admitted during year just at the close of the ar.

Since the formation of the class in Gondal five *dais* have passed, and certificates in the form prescribed by the Central Committee were issued to as many passed *dais*. The old trained *dais* are fairly popular.

The length of the period of training is three years. During the period of training the *dais* have, under the supervision of the Matron or a staff *dai*, nursed a number of the very serious cases that were treated at the hospital.

Of the old trained *dais* two are in the service of this State's medical department and forty-three cases are reported as having been conducted by these two *dais* during the year.

The greatest drawback to success is the backwardness and illiteracy of this special class of women from whom midwives come, and strenuous endeavours are being made to overcome this difficulty which is felt keenly in Gondal, and this is why there are always fluctuations in the number of *dais* class.

The pupils of the *dais* class are lectured to daily by the Chief Medical Officer. They also receive practical instructions in the maternity wards under the supervision of the head midwife of the hospital, who receives a bonus from the Victoria Memorial Scholarship Fund.

Gwalior.

A brief report from Lt.-Col. D. S. Wagle, Medical Officer to the Maharaja of Gwalior, states that:—"Thirty-eight *dais* were under training the year; those found unfit were removed after giving them a fair trial, and young women of the higher castes were substituted. This batch will be examined at the end of 1910. There are 12 *dais* working in the district dispensaries and doing good work. 381 maternity cases were attended to in the districts, and about 400 in the Lashker city by our *dais*."

Hyderabad.

Lt.-Col. P. J. Lumsden, I.M.S., the Residency Surgeon, forwards the following statement of the year's operations in this centre drawn up by Miss G. A. Blain:—

"At the beginning of December 1909, 8 *dai* pupils remained on the rolls, 19 were admitted during the year, making a total of 27, out of which number 9 passed the examination, and received certificates, 11 were either dismissed as useless or left of their own accord. Seven remain under training.

"During the year 1908 to 1909, 410 patients were admitted into the Maternity Hospital, that is an increase of 89 over the previous year. The number would have been greater if the hospital had been opened the full year, but on account of the disastrous flood it was closed from September 28th until January 1st, then it was sometime before the women got confidence again, as they daily feared another flood for sometime.

"Out of the 410 patients admitted, 232 were natural labour, 42 were abortions, and 136 were complicated labours. There were 11 deaths during the year, chiefly among patients who were suffering either from heart or kidney disease, or those who came too late to be properly treated.

"The Maternity Hospital is doing excellent work here, as will be seen from the great increase of natural labours. There are almost always now women in hospital waiting for their confinement. Several *dais* who have passed out are

kept in the hospital as nurses, this the patients like as they have more confidence in the hospital when they see the same faces about them”

This report, though not lengthy, shows steady progress. Lt.-Col. J. R. Indore. Roberts, I.M.S., Superintendent of the Central India Medical School, writes:—
“The class under training was started on 1st January 1909. The class was opened with 20 students to commence with, but decreased to 16. During the year under report the progress of the class was good, though the class had to be closed on account of plague for nearly 2 months, and for this reason the examination for certificates is being held in December, and therefore the results cannot be shown in this report.”

The Acting Chief Medical Officer, Baroda State, sends statistics relating Baroda. to the progress in this Branch. From November 1908 to October 1909, 15 lectures were delivered to *dais* in training, all of which were well attended. The report runs:—

“The class was started on 1st November 1908, and has three Hindu candidates, two of whom are given scholarships from the Victoria Memorial Scholarship Fund, and the third comes from the Cambay State with a special scholarship.

“As resolved by the Local Committee, only two new candidates were admitted to the class, and as they have to undergo a course of training for three years, no examination was held this year.

“The sum received during the period under review was Rs 700, and this with the balance of Rs 1,190-6-6 of the previous year, amounted to Rs 1,890-6-6. Out of this sum Rs 437-5-6 were disbursed, thus leaving a balance of Rs 1,453-1-0.

“The average monthly cost of each *dai* was Rs 12-2-4 against Rs 6-1-6 in the previous year. The increase in the average cost is due to limiting the number of candidates admitted to two. Last year there were 10 candidates.”

The report from this centre is also brief, but encouraging. Miss Kashmir. Lauder, M.D., the Superintendent of the Zenana Hospital, Srinagar, writes:—

“Of the five *dais* under training last year two have left during the year and three are still under training; two new *dais* have replaced those who left during the year, so that the number of the class remains the same. 120 maternity cases have been treated during the year, and it is encouraging to note that the number of maternity cases coming into the hospital for treatment, both normal and abnormal, continues to increase, the number being 25 this year against 15 in 1908.”

Mr. C. H. A. Hill, C.I.E., Agent to the Governor General, Kathiawar, Junagadh. forwards the following report by Major A. Haston, I.M.S., Agency Surgeon, Kathiawar:—

“We were fortunate last year in securing a good probationer, who has recently completed her training and received a certificate; but, as I have previously explained, it is most difficult to obtain suitable probationers locally, and it has so far proved impossible to find any one to take her place.

Enquiries are being made, however, and I hope shortly to be able to engage a second probationer.

"Models and books have been purchased, and with the assistance of Dr. Wickham of the Rasulkhanji Women's Hospital, this branch is, I consider, in a better position than most mofussil centres for training midwives. Without the practice afforded by the women's hospital it would have been impossible to provide really adequate maternity teaching, and I would bring to your notice that nearly all instruction, except that in general nursing, for which the fund is indebted to Miss Eagan's kind assistance, was carried out by Miss Wickham."

Mysore.

The Mysore reports and statistics submitted by Lieutenant-Colonel J. Smyth, I.M.S., are prepared with their usual care and thoroughness. Particulars are given of some 16 pupils who have successfully passed out since the formation of the fund in that State. The following extracts are appended:—

"There was a larger number of applicants for scholarships than we had funds to entertain. I brought this to the notice of the Central Committee, in my letter, dated 5th December 1908. This question was also a subject of discussion at the meeting held at the Residency, Bangalore, on 2nd October 1909, under the presidency of Mrs. Fraser, an extract of which was sent to the Central Committee. If the contribution now being received from the Central Committee is doubled I shall be able to take on more pupils.

"As the number of applications even for Dufferin pupils is considerable, it is proposed that we shall insist on these pupils also being to some extent educated. It will be a great help to them in keeping abreast of their professional knowledge, if they are able to read the vernacular.

"Anna Mary and Arokiammaul were examined after a course of 18 months in midwifery, and having passed the examination underwent training in sicknursing for six months, and were found qualified.

"Mrs. P. M. Devine was examined after a course of 18 months in midwifery and was qualified. She did not undergo training in sicknursing as she had training in that branch already. Jeyaseelamma and Venkamma are in their 19th month of training. Puttama and Mariamma in their 18th and 17th months, respectively. C. T. Mary underwent training for 5 months, and afterwards absconded.

"From the above it will be seen that out of 8 pupils, 3 passed out, 4 are under training, and 1 absconded.

"The accounts of the fund were last audited in 1905, and that from 1906 to 1909, *i.e.*, from 1st December 1905 to 30th November 1909, covering a period of 4 years were taken up for audit this year. This audit of accounts I entrusted to Mr. J. S. Chakravarti, M.A., F.R.A.S., Comptroller to the Government of Mysore, who at the Committee's request has very willingly taken up this work."

Rajputana.

The review received from Lieutenant-Colonel H. N. V. Harington, I.M.S.,

Residency Surgeon and Chief Medical Officer, is, as usual, very complete and on the whole satisfactory. It runs :—

"Brief report on the operations and progress of the Victoria Memorial Scholarship Fund, and on the training of Indian midwives for the year ending the 30th November 1909 in Rajputana.

"Ajmer.—Mrs. M. Kane, Lady Superintendent, has been in charge of the *dai* training class at Ajmer throughout the year. The 4 pupils who were mentioned in last year's report as being under instruction continued to work till the end of the session when they were examined by the Civil Surgeon, Ajmer, on the 23rd April 1909, when all of them passed and obtained their certificates, and the usual honorarium was given to successful candidates.

"Four pupil midwives, 2 from Jhalawar, and 2 from Ajmer were admitted into the class, namely, 3 in July and 1 in August 1909.

"A more commodious building has been obtained on rent and it is much more suitable for the purpose than the original quarters which have been vacated.

"The *dai* pupils attended 145 cases of various kinds against 124 in the previous year, of these 10 were in-door, 62 out-door, and 73 private cases.

"As regards the funds of the Victoria Memorial Scholarship Fund the opening balance to credit on 30th November 1908 was Rs 6,995-14-7, receipts Rs 7,755, total Rs 10,750-14-7, of which Rs 2,168-4-9 were expended in the Ajmer *dai* class as per statement appended from the 1st December 1908, to the 30th November 1909, against Rs 2,206-4-5 in the previous year. The closing balance in hand on the 30th November 1909 was Rs 8,582-9-10.

"Jaipur.—There are 13 *daïs* who belong to families of hereditary midwives in the *dai* training class attached to the Mayo Hospital, Jaipur. They attend lectures given by the Lady Doctor Miss Sykes, M.D., three times a week, and see the clinical work of the hospital for a term of two years. Each of them receive an allowance of Rs 2 per mensem. After two years a new set is admitted and the old one discharged.

"Kotah.—During the early part of the year under report a class for the training of *daïs* was started and lasted for three months. On completing the course they were examined by the Agency Surgeon, Kotah, and four of them passed, two with credit. Six pupils were admitted into the class who will complete their course at the end of the year. While under instruction each of them receive an allowance of Rs 5 a month. A scheme for the instruction and encouragement of suitable *daïs* has been sanctioned by the Durbar, and has been made known throughout the State.

"Tonk.—This class was opened at the beginning of the year under report and closed in March, two *daïs* are said to have been under training at beginning of the year, but there is no record of either having passed. The class was reopened in August 1909 after the arrival of Miss Reed from England, and four pupils are now under training, two of whom belong to the class of local midwives who practice in the city. The course is for one year.

Memorial Scholarships Fund during the year 1909.

PAYMENTS.	Details,	TOTAL.
	<i>R a. p.</i>	<i>R a p.</i>
<i>Objects of Fund—</i>		
<i>Grants-in-aid—</i>		
Baluchistan	1,838 0 0	
Baroda	700 0 0	
Bengal	1,892 0 0	
Berar	925 0 0	
Bhopal	460 0 0	
Burma	1,320 0 0	
Central Provinces	781 0 0	
Gondal	275 0 0	
Gwalior	3,500 0 0	
Hathwa	1,500 0 0	
Hyderabad	1,717 0 0	
Indore	1,450 0 0	
Junagadh	192 0 0	
Mysore	600 0 0	
Punjab	3,407 0 0	
Rajputana	3,742 0 0	
United Provinces	4,794 0 0	
Miscellaneous	25 9 6	
		29,118 9 0
<i>Expenses of Fund—</i>		
Salaries of Office Establishment	1,803 0 0	
Office Contingencies, including postage, telegrams, etc.	457 5 10	
Commission on investments, realizing interest, etc.	204 7 5	
Office Building	1,500 0 0	
		3,974 13 3
	TOTAL .	33,093 6 9

(Sd) B. W. MARLOW, Colonel,
Honorary Treasurer.

Scholarships Fund up to the 31st December 1909.

EXPENDITURE.	Ledger Folio.	Amount.
<i>Investments—</i>		<i>Rs. a. p.</i>
4% Calcutta Municipal Debentures of 1899-1900	16	25,000 0 0
4% Ditto ditto of 1897-98	81	15,000 0 0
4% Ditto ditto of 1903-04	83	12,000 0 0
4½% Rangoon Municipal Debentures of 1900	19	62,000 0 0
4% Calcutta Port Trust Debentures of 1895	17	5,000 0 0
4½% Rangoon Municipal Debentures of 1904	83	2,85,450 0 0
4% Madras Municipal Debentures of 1903	75	1,66,950 0 0
6% Loan to Ajudhia Estate, Court of Wards, United Provinces	93	1,00,000 0 0
		<u>7,01,490 0 0</u>
<i>Objects of Fund—</i>		
<i>Grants-in-aid—</i>		
Baluchistan	93	6,078 0 0
Baroda	68	5,826 0 0
Bengal	54	23,756 0 0
Berar	62	7,400 8 0
Bhopal	48	3,290 0 0
Burma	86	6,584 2 3
Central Provinces	44	7,155 0 0
Gondal	46	1,800 0 0
Gwalior	50	28,000 0 0
Hathwa	56	12,000 0 0
Hyderabad	40	13,877 8 0
Indore	52	11,900 0 0
Junagadh	60	1,440 0 0
Kashmir	69	315 0 0
Mysore	42	5,300 0 0
Punjab	74	19,550 8 0
Rajputana	72	25,720 8 0
United Provinces	66	7,291 0 0
Miscellaneous	96	8,925 1 2
Profit and Loss	63	100 0 0
		<u>2,06,609 3 10</u>
<i>Expenses of Fund—</i>		
Permanent advances	57	100 0 0
Salaries, wages, and travelling expenses of Office Establishment	24	9,512 0 0
Office Contingencies, including postage, telegrams, etc.	28	3,399 7 5
Commission on investments, realizing interest, etc.	32	3,951 11 0
Office Building	100	1,500 0 0
		<u>18,463 2 5</u>
	...	
TOTAL .		9 26,562 6 3

(Sd.) B. W. MARLOW, Colonel,

Honorary Treasurer.

Investment Account of the Victoria Memorial Scholarships Fund.

										Nominal Value.	Cost.
										Rs. a. p.	Rs. a. p.
4 %	Calcutta Municipal Debentures of 1899-1900	.	.	.	.	.	.	.	.	25,000 0 0	25,000 0 0
4 %	Ditto of 1897-98	.	.	.	.	.	.	.	.	15,000 0 0	15,000 0 0
4 %	Ditto of 1903-04	.	.	.	.	.	.	.	.	12,000 0 0	12,000 0 0
4 %	Calcutta Port Trust Debentures of 1895	.	.	.	.	.	.	.	.	5,000 0 0	5,000 0 0
4 %	Madras Municipal Debentures of 1903	.	.	.	.	.	.	.	.	1,95,000 0 0	1,96,950 0 0
4½ %	Rangoon Municipal Debentures of 1900	.	.	.	.	.	.	.	.	62,000 0 0	62,000 0 0
4½ %	Rangoon Municipal Debentures of 1904	.	.	.	.	.	.	.	.	2,59,500 0 0	2,35,450 0 0
Loan at 6 % per annum to Ajudhia Estate, United Provinces, Court of Wards										1,00,000 0 0	1,00,000 0 0
TOTAL										6,73,500 0 0	7,01,490 0 0

CALCUTTA;

The 1st March 1910.

(Sd.) B. W. MARLOW, Colonel,

Honorary Treasurer.

Victoria Memorial Scholarships Fund.

Rules and Regulations.

1. The sums raised in furtherance of the above object shall constitute the Victoria Memorial Scholarships Fund, shall be kept separate from the present investment of the Countess of Dufferin's Fund proper, and interest accruing therefrom shall be exclusively used for the object for which Lady Curzon instituted the said Fund.

2. An Executive Committee shall be appointed by the Central Committee and charged with its direct management, and this Committee shall consist of—

- (1) the Lady President;
- (2) the Director-General, Indian Medical Service;
- (3) a member nominated by the Central Committee;
- (4) the Honorary Secretary, Central Committee, Countess of Dufferin's Fund.

3. For the local administration of the Fund there shall be formed a Local Committee in each centre of operations, consisting of—

- (a) the Civil Surgeon of the district,
- (b) the wife of a senior Civilian, and
- (c) a Secretary selected by the other two members.

The Local Committee shall in each instance be in direct communication with, and immediately responsible to, the local Inspector-General of Civil Hospitals or Administrative Medical Officer, who shall be guided by such instructions as the Executive Committee may think fit to issue.

4. The Executive Committee shall issue the necessary formal instructions to the Provincial and Local Branches, it being distinctly understood—

- (a) that the interest of the subscriptions shall be, as far as possible, expended in the districts whence they have been received, and
- (b) that in all cases the *dais* shall be instructed in hospitals, training-schools and dispensaries lying nearest to the localities in which they will ultimately be engaged.

5. The said Fund may be utilized not only for the provision of scholarships, but also for the payment of teachers, provision of models, books and such incidental expenses as the Executive Committee may consider to fall within the objects of the Fund.

6. The Executive Committee may call for special reports from the Local Branches regarding their administration of the said Fund, and the results shall be shown in a separate section of the ordinary annual report issued by the National Association for Supplying Female Medical Aid to the Women of India.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526	527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547	548	549	550	551	552	553	554	555	556	557	558	559	560	561	562	563	564	565	566	567	568	569	570	571	572	573	574	575	576	577	578	579	580	581	582	583	584	585	586	587	588	589	590	591	592	593	594	595	596	597	598	599	600	601	602	603	604	605	606	607	608	609	610	611	612	613	614	615	616	617	618	619	620	621	622	623	624	625	626	627	628	629	630	631	632	633	634	635	636	637	638	639	640	641	642	643	644	645	646	647	648	649	650	651	652	653	654	655	656	657	658	659	660	661	662	663	664	665	666	667	668	669	670	671	672	673	674	675	676	677	678	679	680	681	682	683	684	685	686	687	688	689	690	691	692	693	694	695	696	697	698	699	700	701	702	703	704	705	706	707	708	709	710	711	712	713	714	715	716	717	718	719	720	721	722	723	724	725	726	727	728	729	730	731	732	733	734	735	736	737	738	739	740	741	742	743	744	745	746	747	748	749	750	751	752	753	754	755	756	757	758	759	760	761	762	763	764	765	766	767	768	769	770	771	772	773	774	775	776	777	778	779	780	781	782	783	784	785	786	787	788	789	790	791	792	793	794	795	796	797	798	799	800	801	802	803	804	805	806	807	808	809	810	811	812	813	814	815	816	817	818	819	820	821	822	823	824	825	826	827	828	829	830	831	832	833	834	835	836	837	838	839	840	841	842	843	844	845	846	847	848	849	850	851	852	853	854	855	856	857	858	859	860	861	862	863	864	865	866	867	868	869	870	871	872	873	874	875	876	877	878	879	880	881	882	883	884	885	886	887	888	889	890	891	892	893	894	895	896	897	898	899	900	901	902	903	904	905	906	907	908	909	910	911	912	913	914	915	916	917	918	919	920	921	922	923	924	925	926	927	928	929	930	931	932	933	934	935	936	937	938	939	940	941	942	943	944	945	946	947	948	949	950	951	952	953	954	955	956	957	958	959	960	961	962	963	964	965	966	967	968	969	970	971	972	973	974	975	976	977	978	979	980	981	982	983	984	985	986	987	988	989	990	991	992	993	994	995	996	997	998	999	1000	1001	1002	1003	1004	1005	1006	1007	1008	1009	1010	1011	1012	1013	1014	1015	1016	1017	1018	1019	1020	1021	1022	1023	1024	1025	1026	1027	1028	1029	1030	1031	1032	1033	1034	1035	1036	1037	1038	1039	1040	1041	1042	1043	1044	1045	1046	1047	1048	1049	1050	1051	1052	1053	1054	1055	1056	1057	1058	1059	1060	1061	1062	1063	1064	1065	1066	1067	1068	1069	1070	1071	1072	1073	1074	1075	1076	1077	1078	1079	1080	1081	1082	1083	1084	1085	1086	1087	1088	1089	1090	1091	1092	1093	1094	1095	1096	1097	1098	1099	1100	1101	1102	1103	1104	1105	1106	1107	1108	1109	1110	1111	1112	1113	1114	1115	1116	1117	1118	1119	1120	1121	1122	1123	1124	1125	1126	1127	1128	1129	1130	1131	1132	1133	1134	1135	1136	1137	1138	1139	1140	1141	1142	1143	1144	1145	1146	1147	1148	1149	1150	1151	1152	1153	1154	1155	1156	1157	1158	1159	1160	1161	1162	1163	1164	1165	1166	1167	1168	1169	1170	1171	1172	1173	1174	1175	1176	1177	1178	1179	1180	1181	1182	1183	1184	1185	1186	1187	1188	1189	1190	1191	1192	1193	1194	1195	1196	1197	1198	1199	1200	1201	1202	1203	1204	1205	1206	1207	1208	1209	1210	1211	1212	1213	1214	1215	1216	1217	1218	1219	1220	1221	1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Progress of the various branches up to the 30th November 1909—*contd.*

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.				RECEIPTS.				EXPENDITURE.				REMARKS.		
		During year ending 30th November 1909.	From formation of branch to 30th November 1909.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1909.		Since formation of branch to 30th November 1909.		During year ending 30th November 1909.	From formation of branch to 30th November 1909.	Balance in hand on 30th November 1909.	Average monthly cost of each pupil during training.			
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.							
1	2	3	4	5	6	7	8	Bengal—contd.				9	10	11	12	13
								R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	
Daltonganj, Palanau.	1st Aug. 1901.	...	6	...	...	...	...	...	150 0 0	...	...	...	...	...	...	No class.
Perulia, Manbhumi.	6th July 1905.	...	3	...	...	...	...	...	313 2 0	159 15 3	...	469 9 10	3 7 5	1 12 0	...	No class formed during the year.
Chabassa, Singbhum.	17th April 1906.	...	2	...	...	...	...	...	160 0 0	102 0 0	...	188 7 0	73 9 0	...	...	Do.
Darjelling, Victoria Memorial Hospital.	7th April 1909.	4	4	...	...	360 0 0	200 0 0	360 0 0	200 0 0	447 4 2	447 4 2	112 11 10	13 15 9	...	...	New class formed.
Monghyr	1st Nov. 1903.	...	1	...	...	...	...	...	586 0 0	...	...	586 0 0	...	...	...	No class formed during the year.
Serampore, Walsh Hospital.	1st July 1903.	...	15	...	...	...	...	65 0 0	622 13 7	...	...	462 2 0	226 10 7	...	...	Do.
Champanan, Mothari Hospital.	1st Feb. 1903.	...	19	...	...	...	...	102 9 0	409 8 0	...	...	512 1 0	...	...	...	Do.
Balasore	5th May 1903.	...	15	...	...	...	...	629 3 10	114 0 0	...	...	629 3 10	...	...	...	Do.
Total		36	250	65	...	2,139 0 0	2,711 9 8	16,535 2 4	19,436 11 10	3,664 0 9	21,574 12 8	5,007 9 0	...	...	...

Eastern Bengal and Assam.									
Dacca.	1902	5	36	5	288 0 0	243 0 0	518 0 0	431 3 5	43 12 10
	TOTAL.	5	36	5	288 0 0	243 0 0	518 0 0	431 3 5	43 12 10
Amraoti	21st July 1901.	5	31	2	(a) 925 0 0	7402 2 0	(b) 7,144 13 1	887 5 0	257 5 3
Atkora town.	25th June 1907.	8	13	5	400 0 0	41 0 0	1,300 0 0	131 4 3	914 6 7
	TOTAL.	13	44	7	1,325 0 0	41 0 0	8,602 2 0	1,038 9 3	1,171 12 10
Rangoon	21st Feb. 1905.	9	12	13	2,594 2 8	7,498 5 4	2,594 2 8	7,498 5 4	About 19 0 0
	TOTAL.	9	12	13	2,594 2 8	7,498 5 4	2,594 2 8	7,498 5 4	...

Berar.

Burma.

(a) Includes Rs. 200 for the det class at Akola.
 (b) Including Rs. 50-87 for building quarters for dars and repairs to them. R a. f.
 * With the Na-
 nager, Oil
 Mill. 900 0 0
 With the
 Secretary 14 6 7
 914 6 7

The girls undergoing training here are mostly Burmese Karens and a few Europeans, no native midwives attend. The training and classes, etc., do not therefore correspond to those held in India for the training of "dars".

Progress of the various branches up to the 30th November 1909—*contd.*

[illegible]

Branch.	1st Aug. 1905.	1st Dec. 1905.	1st Jan. 1906.	1st April 1906.	1st July 1906.	1st Oct. 1906.	1st Dec. 1906.	Total.	For low castes.	For high castes.
Damoh Dis- pensary	5	5	5	5	5	5	5	5	5	5
Bhandara Dis- pensary.	5	5	5	5	5	5	5	5	5	5
Tumkur Dis- pensary.	4	4	4	4	4	4	4	4	4	4
Khandwa Dis- pensary.	3	3	3	3	3	3	3	3	3	3
Rajpur Dis- pensary.	2	2	2	2	2	2	2	2	2	2
Sonol Dispen- sary.	3	3	3	3	3	3	3	3	3	3
Balaghat Dis- pensary	2	2	2	2	2	2	2	2	2	2
Nagpur Branch.	1	1	1	1	1	1	1	1	1	1
Jubbulpore	8	8	8	8	8	8	8	8	8	8
Total.	9	9	9	9	9	9	9	9	9	9
United Provinces.										
Betwaes	2	2	2	2	2	2	2	2	2	2
Lucknow	3	3	3	3	3	3	3	3	3	3
Allahabad	7	7	7	7	7	7	7	7	7	7
Cawnpore	13	13	13	13	13	13	13	13	13	13
Agra	6	6	6	6	6	6	6	6	6	6
Total.	9	9	9	9	9	9	9	9	9	9

Jagdal dhal was discharged from service on account of her ill-health from 17th Decem- bar 1905, and re- placed by one named Mouni.

Progress of the various branches up to the 30th November 1909—*contd.*

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.					RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1909.	From formation of branch to 30th November 1909.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1909.		Since formation of branch to 30th November 1909.		During year ending 30th November 1909.	From formation of branch to 30th November 1909.	Balance in hand on 30th November 1909.	Average monthly cost of each pupil during training.		
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.						
1	2	3	4	5	6	7	8	9	10	11	12	13			
Punjab.															
Delhi	April 1907.	...	...	7	2 years	R a. p. 241 10 7	R a. p. 1,069 13 0	R a. p. ...	R a. p. ...	R a. p. 241 10 7	R a. p. 1,069 13 0	R a. p. ...	R a. p. 5 0 0	
Ambala	May 1907 .	1	1	9	2 years	252 0 0	10 0 0	603 0 0	10 0 0	262 0 0	613 0 0	...	3 0 0		
Simla	1st Oct. 1907.	12	48	9	1 year	1,026 0 0	...	3,738 0 0	...	970 4 0	3,822 8 0	215 8 0	6 0 0		
Ludhiana . . . . .	...	5	12	(a) 14 (a) 3 to 4 indige- nous <i>adits</i> 23 (b) 2 years	...	2,369 4 6	150 0 0	4,455 5 3	...	*2,421 0 10	...	...	5 7 6	*Includes extra pay to trained <i>adits</i> and part of salary of hospital assistant.
Ferozepore	Nov. 1907	...	2	46	2 years	108 0 0	12 0 0	305 12 0	12 0 0	120 0 0	317 12 0	...	4 0 0	† Three of these students are waiting their examination.	
Lahore	1st Jan. 1903.	3	12	10	2 years	947 12 0	...	4,984 4 9	...	947 12 0	4,984 4 9	...	7 6 9		
Amritsar . . . . .	...	...	5	...	...	...	...	2,493 12 5	...	...	2,567 15 5	35 13 0	...	
Rawalpindi . . . . .	...	...	...	...	...	...	...	452 9 0	...	...	452 9 0	...	...
TOTAL		21	80	78	...	4,944 21 2	172 0 0	1,812 8 5	22 0 0	4,962 11 5	13,327 14 2	251 5 0	...		

Quetta.	25th Feb. 1907.	3	1	2 years	1,564 0 0	Baluchistan.				1,410 4 0	4,685 6 8	743 9 4	117 8 9
						...	5,428 0 0				
Sibi	Jan. 1907.	2	4	3 years	174 0 0	"	650 0 0	"	45 4 9	396 3 7	614 0 10	81 3 11	8 2 10
Baroda	Total	4	3	"	1,835 0 0	"	6,073 0 0	"	45 4 9	1,600 7 7	5,199 7 6	823 13 3	...
Bhopal	1st Nov. 1906	41	3	2 years	700 0 0	"	5,825 0 0	"	...	437 5 6	4,373 15 0	1,453 1 0	13 2 4
Bhopal	Total	44	3	"	700 0 0	"	5,825 0 0	"	...	437 5 6	4,373 15 0	1,453 1 0	...
Gondal	April 1907.	13	39†	1 year	400 0 0	"	3,390 0 0	"	...	511 13 6	2,729 7 3	560 8 9	1 1 1
Gondal Hospital	Total	13	39	"	400 0 0	"	3,390 0 0	"	...	511 13 6	2,729 7 3	560 8 9	...
Gondal Hospital	1st Jan. 1907.	5	3	3 years	275 0 0	"	1,800 0 0	"	...	236 14 0	1,710 8 2	89 7 10	7 5 4
Gondal Hospital	Total	5	3	"	275 0 0	"	1,800 0 0	"	...	236 14 0	1,710 8 2	89 7 10	...

* Only two calculations are paid from Victoria Memorial Scholarship Fund and the third is paid by the Bombay State.

† New class started under H. H. the Begum's order.

Progress of the various branches up to the 30th November 1909 — *contd.*

Stations where classes are held,	Date of formation of branch.	PEOPLE TRAINED.						RECEIPTS.			EXPENDITURE.				REMARKS.
		During year ending 30th November 1909.	From formation of branch to 30th November 1909.	From formation of branch to 30th November 1909.	From formation of branch to 30th November 1909.	From formation of branch to 30th November 1909.	From formation of branch to 30th November 1909.	During year ending 30th November 1909.	From formation of branch to 30th November 1909.	From formation of branch to 30th November 1909.	From formation of branch to 30th November 1909.	From formation of branch to 30th November 1909.	From formation of branch to 30th November 1909.	From formation of branch to 30th November 1909.	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Lashkar	29th April 1902.	...	48	32	3 years	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.
	"Total"	...	48	32	...	3,600 0 0	36,200 0 0	3,019 5 5	20,725 13 8	5,474 2 4	6 8 1	6 8 1	6 8 1	6 8 1	6 8 1
	30th Dec. 1901.	9	145	7	...	...	...	...	...	...	...	...	...	...	...
Hyderabad School,	30th Dec. 1901.	9	145	7	...	...	...	...	...	...	...	...	...	...	...
Aurangabad.	1st Jan. 1906.	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTAL	TOTAL	9	145	7	...	...	...	...	...	...	...	...	...	...	...

R a. p.
 * Exclusive of—
 Teacher's pay : 500 0 0
 Clerk : 60 0 0
 Railway fare : 20 0 0
 Contin. : 20 0 0
 Bencies 92 15 9
 Total : 712 15 9
 Average calculated on Rs. 704-14-4, the actual pay of staff during the year.

Indore	8th April 1902.	135	1	1,450 0 0	1 6 0	11,000 0 0	1 6 0	1,303 7 6	10,999 4 8	902 1 4	6 13 0
	TOTAL	135	1	1,450 0 0	1 6 0	11,000 0 0	1 6 0	1,303 7 6	10,999 4 8	902 1 4	6 13 0
Sidhagar	15th Jan. 1902.	19	3	2 years	413 0 0	315 0 0	3,542 11 3	413 0 0	2,857 11 3	..	8 0 0
	TOTAL	19	3	2 years	413 0 0	315 0 0	3,542 11 3	413 0 0	2,857 11 3	..	8 0 0
Rajkot	1st June 1902.	1	16-7-08 to 28 10-09	197 0 10 including Savings Bank Interest.	499 0 7	..	..	328 7 10	300 12 2	193 4 5	14 8 11
	TOTAL	1	16-7-08 to 28 10-09	197 0 10 including Savings Bank Interest.	499 0 7	..	..	328 7 10	300 12 2	193 4 5	14 8 11
Maternity at Birsore and Bangalore, Victoria Hospital, Bangalore, and Lady Curzon Hospital, Civil Station, Bangalore.	1st July 1902.	16	4	24 months	593 8 0	5,300 1 2	..	792 11 1	5,028 4 1	271 13 1	10 0 0
	TOTAL	16	4	24 months	593 8 0	5,300 1 2	..	792 11 1	5,028 4 1	271 13 1	10 0 0

Progress of the various branches up to the 30th November 1909—*concl'd.*

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.				RECEIPTS.				EXPENDITURE.				REMARKS.		
		During year ending 30th November 1909.	From formation of branch to 30th November 1909.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1909.		Since formation of branch to 30th November 1909.		During year ending 30th November 1909.	From formation of branch to 30th November 1909.	Balance in hand on 30th November 1909.	Average monthly cost of each pupil during training.			
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.							
1	2	3	4	5	6	7	8	Rajputana.				9	10	11	12	13
Almer	1st April 1903.	4	55	4	10 months.	R a. p. 3,742 0 0	R a. p. 13 0 0	R a. p. 25,720 8 0	R a. p. 175 6 0	R a. p. 2,168 4 9	R a. p. 17,313 4 2	R a. p. 8,582 9 10	R a. p. 49 0 0			
	Total	4	55	4	...	5,742 0 0	13 0 0	25,720 8 0	175 6 0	2,168 4 9	17,313 4 2	8,582 9 10	...			
GRAND TOTAL		124	1,025	257	...	31,656 14 10	3,041 11 0	1,30,496 4 1	25,839 10 1	29,016 3 6	1,54,238 2 5	20,234 8 1	...			

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In the matter of Act XXI of 1860 of the Acts of the Viceroy and Governor-General of India in Council, being an Act for the Registration of Literary, Scientific and Charitable Societies

AND

In the matter of "The National Association for Supplying Female Medical Aid to the Women of India."

Memorandum of Association.

1. The name of the Association is "The National Association for Supplying Female Medical Aid to the Women of India."

2. The objects for which the Association is established are—

(1) *Medical tuition*, including the teaching and training in India of women as doctors, hospital assistants, nurses and midwives.

(2) *Medical relief*, including—

(a) the establishment under female superintendence of dispensaries and cottage hospitals for the treatment of women and children ;

(b) the opening of female wards under female superintendence in existing hospitals and dispensaries ;

(c) the provision of female medical officers and attendants for existing female wards ;

(d) the founding of hospitals for women where special funds or endowments are forthcoming

(3) The supply of trained female nurses and midwives for women and children in hospitals and private houses.

(4) The management of the Fund raised for the above objects, and which is known as "The Countess of Dufferin's Fund."

(5) The purchase or acquisition on lease, or in exchange, or on hire or otherwise, of any real or personal property, and any rights or privileges necessary or convenient for the purposes of the Association.

(6) The erection, construction, alteration, and maintenance of any buildings necessary or convenient for the purposes of the Association.

(7) The sale, improvement, management and development of all or any part of the property of the Association.

(8) The promotion and establishment of Branches and of other Societies or Associations with similar objects, and the affiliation or amalgamation of such Societies or Associations with this Association.

(9) The doing of all such things as are incidental or conducive to the attainment of the above objects or any of them.

3 The names, addresses and occupations of the persons who are members of and form the Central Committee or governing body of the said Association are as follows :—

1st—Her Excellency the Right Honourable the Countess of Dufferin and Ava, C. I., Lady President, whose address is—Viceroy's Camp, India.

2nd—The Hon'ble Mr. A. R. Scoble, Q.C., Member of the Viceroy's Council.

3rd—The Hon'ble Sir Charles Atchison, K.C.S. I., Member of the Viceroy's Council.

4th—The Hon'ble Sir Dinshaw Manockjee Petit, Kt, of Bombay, Additional Member of the Viceroy's Council.

5th—A. P. MacDonnell, Esq., c.s., Secretary to the Government of India in the Home Department.

6th—The Hon'ble Mr. C. H. Moore (Messrs. Gillanders, Arbuthnot & Co.), Calcutta, Member of the Council of His Honour the Lieutenant-Governor of Bengal.

7th—The Hon'ble Sir Syed Ahmad Khan, Bahadur, K.C.S.I., of Aligarh, Member of the Council of His Honour the Lieutenant-Governor of the North-West Provinces.

8th—Surgeon-General Sir Benjamin Simpson, M.D., K.C.I.E., Sanitary Commissioner with the Government of India.

9th—Maharaja Sir Jotendra Mohun Tagore, Bahadur, K.C.S.I., Calcutta.

10th—Sir Alexander Wilson, Kt. (Messrs. Jardine, Skinner & Co.), Calcutta, President, Bank of Bengal.

4. A copy of the Rules and Regulations of the said National Association is filed with this Memorandum of Association, and the undersigned, being seven of the members of the governing body of the said National Association, do hereby certify that such copy of such Rules and Regulations is a correct copy of the Rules and Regulations of the said National Association.

As witness our several and respective hands and signatures this 29th day of February 1888.

WITNESS.

HARRY COOPER, Major,

Loyal North Lancashire Regiment.

SIGNATURES.

HARRIOT DUFFERIN.

ANDREW R. SCOBLE.

C. U. AITCHISON.

JOTENDRA MOHUN TAGORE.

B. SIMPSON.

DINSHAW MANECKJEE PETIT.

CHARLES H. MOORE.

Rules and Regulations of the National Association for Supplying Female Medical Aid to the Women of India.

The Lady President.

1. The first Lady President of the National Association is Her Excellency the Right Honourable the Countess of Dufferin, c.i. On her vacating this office the power of filling the vacancy shall rest with the Central Committee.

Members.

2. The Members of the National Association shall consist of three classes, namely:—

A—Life Councillors; B—Life Members; and C—Ordinary Members.

Life Councillors.

3. Every donor of £500 or R5,000, or of subscriptions which in the aggregate amount to £500 or R5,000, and upwards, to the funds of the National Association, shall be a Life Councillor.

Life Members.

4. Every donor of £50 or R500, or of subscriptions which in the aggregate amount to £50 or R500, and upwards, to the funds of the National Association, shall be a Life Member.

Ordinary Members.

5. Every subscriber of not less than 10s or Rs5 annually to the funds of the National Association shall, during the currency of his subscription, be an Ordinary Member of the Association. An Ordinary Member shall pay an entrance fee of £1 or Rs10. If he does not pay his entrance fee separately, the first £1 or Rs10 subscribed by him shall be treated as his entrance fee.

Rights and Privileges of Members.

Affairs to be managed by Central Committee.

Constitution of the Central Committee.

8. The first members of the Central Committee shall be the Lady President of the National Association, and the following gentlemen, namely:—

A. P. MacDONNELL, Esq., *Secretary to the Government of India, Home Department.*
 Surgn.-Genl. Sir BENJAMIN SIMPSON, M.D.,
K.C.I.B., Sanitary Commissioner with the Government of India.

The Hon'ble Sir DINSHAW MANECKJEE
 PETIT, Kt., of Bombay, *Additional Member of the Viceroy's Council*
 Maharaja Sir JOTENDEA MOHUN TAGORE,
 Bahadur, K.C.S.I.
 The Hon'ble Sir SYED AHMAD KHAN,
 Bahadur, of Aligarh, K.C.S.I.
 The Hon'ble Mr. C. H. MOORE (Messrs.
 Gullanders, Arbuthnot & Co).
 Sir ALEXANDER WILSON, Kt. (Messrs.
 Jardine, Skinner & Co.), *President, Bank of Bengal.*

Powers of Central Committee.

10. The Central Committee shall have power—

- (a) to apply "The Countess of Dufferin's Fund" to such purposes as they may consider conducive to the objects of the National Association;
- (b) to invest from time to time, in or upon the securities hereinafter mentioned, such money credited to "The Countess of Dufferin's Fund" as may not be required for the purposes of the National Association, and to vary and realize investments;
- (c) to make and vary such regulations not inconsistent with the Memorandum of Association and these Rules as may be necessary or expedient for the conduct

of the business of the National Association, and to fix from time to time the quorum necessary for the transaction of business, but until they shall otherwise determine, four members of the Central Committee shall form a quorum; and

- (d) generally to do such things as they may consider necessary or expedient for the purpose of carrying out the objects of the National Association.

Duties of Central Committee.

11. The Central Committee shall directly control local operation for the objects of the National Association in those parts of the country where a Branch Association, such as is hereinafter referred to, does not exist. It shall specially endeavour to assist any Ruling Chiefs who may desire to organize similar operations within their own territories, and who may seek the advice or aid of the National Association. It shall publish periodical statements of the accounts and the reports of the work done by the National Association, by the Branch Associations aforesaid, and by Societies affiliated to the National Association.

Officers.

12. The Central Committee shall have power to appoint from time to time an Honorary Secretary and other officers of the National Association, and to delegate to such officers such of their powers as they may consider expedient. The first Honorary Secretary shall be Major Harry Cooper, A.-D.-C.

Funds.

13. All moneys subscribed to the support of the objects of the Association shall constitute "The Countess of Dufferin's Fund." The funds under the control of the Executive Committees of the several Branches shall be designated "[.....] Branch of the Countess of Dufferin's Fund." All moneys paid to the Honorary Secretaries of Branches will be credited to the fund at command of the particular Branch to the Honorary Secretary of which the same has been paid, unless specially designated for the Central Committee.

Investments.

14. Any moneys which, in the opinion of the Central Committee, it shall be from time to time necessary or expedient to invest, shall be invested in the joint names of not less than two of the members of such Central Committee, as Trustees for the Association, in some or one of the following securities, but in no others, that is to say:—

- (i) In promissory notes, debentures, stock and other securities of the Government of India, or of the United Kingdom of Great Britain and Ireland.
- (ii) In bonds, debentures and annuities charged by the Imperial Parliament on the revenues of India.
- (iii) In stock or debentures of, or shares in, railway or other companies, the interest whereon shall have been guaranteed by the Secretary of State for India.
- (iv) In debentures or other securities for money issued by, or on behalf of, any Municipal body under the authority of any Act of a Legislature established in British India, or in debentures or other securities issued by, or on behalf of, the Commissioners of the Port of Calcutta, the Trustees of the Port of Bombay, the Trustees of the Harbour of Madras, the Trustees of the Port of Karachi, or the Commissioners of the Port of Rangoon, or by, or on behalf of, any other local authority under the authority of any Act of a Legislature established in British India.

(v) On mortgage of moveable and immoveable property under the management of the Court of Wards.

(vi) In any investments not hereinbefore specified, authorized for the investment of trust funds by the Indian Trusts Act, 1833 (Act II of 1832), or any re-enactment or statutory modification thereof.

General Meetings.

1. be held once in every
2. as the Central Com-
3. f the time and place so
4. At this meeting the
5. eedings and progress of

Special Meetings.

16. The Central Committee may, at any time, and shall upon a written requisition by not less than ten Life Councillors or Life Members in that behalf, call a Special Meeting of the Association. Notice of such meeting shall be given as provided in Rule 15, and such notice shall state the purpose for which such Special Meeting is to be called.

Notices.

17. Any notice required to be or which may be given by advertisement shall be advertised in such newspapers as the Central Committee may from time to time direct in that behalf.

Branch Associations.

management of its own
Association and specially
Secretary of such Branch
Committee for the time
of such Branch have and
moneys as those conferred
Rule 14, respectively, and

such Branch Committee in lieu of the Central Committee may and shall accordingly exercise and perform such powers and duties in respect of any moneys forming part of such Branch funds which in the opinion of such Branch Committee it shall be necessary the joint names of not less than two for its Branch in some or one of the it in no others. The Managing Com- the local agents and representatives of no Branch funds to the Central Com- be arranged between the Central Com-

Affiliated Societies.

National Association
the National Asso-
independent in the
will be requested to
furnish to the Central Committee such reports and information as may be mutually
f their
assist
in con-

Co-operation with Medical Officers of Government.

20. All persons employed by the Association will ordinarily be expected to act in co-operation with, and where necessary, in subordination to the medical officers of Government.

Bankers.

21. The Bankers of the National Association shall, until it is otherwise arranged by the Central Committee, be the Bank of Bengal in India, and Messrs. Coutts and Co. in England.

22. No alteration shall be made in the above Rules and Regulations, except by the vote of a majority of the members present at a Special Meeting called for that purpose as hereinbefore provided.

WITNESS.

HARRY COOPER, *Major,*
Loyal North Lancashire Regiment.

SIGNATURES.

HARRIOT DUFFERIN.
ANDREW R. SCOBLE.
C. U. AITCHISON.
JOTENDRA MOHUN TAGORE.
B. SIMPSON.
DINSHAW MANECKJEE PETIT.
CHARLES H. MOORE.

NOTE.—Rules 14 and 18 were amended as above at a General Meeting of the Association held at Government House, Calcutta, on the 14th February 1908.

Rule 20 was amended as above at a Special Meeting of the Association held at Government House, Calcutta, on the 6th March 1912.

HER MOST GRACIOUS MAJESTY QUEEN
ALEXANDRA.

Patrons.

HER MOST GRACIOUS MAJESTY QUEEN
MARY.

Patron in India.

HIS EXCELLENCY THE RIGHT HON^{BLE} THE BARON HARDINGE OF PENSHURST, P.C.,
G.C.B., G.M.S.I., G.C.M.G., G.M.I.E., G.C.V.O., I.S.O., VICEROY AND GOVERNOR GENERAL
OF INDIA.

Lady President.

HER EXCELLENCY THE LADY HARDINGE OF PENSHURST, C.I.

Vice-Patrons.

II. R. H. Field Marshal THE DUKE OF CONNAUGHT AND STRATHMORE, K.G., K.T., K.P., G.O.B.,
G.C.S.I., G.C.M.G., G.C.I.E., G.C.V.O., P.C.

The Right Hon. the MARQUESS OF LANSDOWNE,
K.G., G.C.S.I., G.C.M.G., G.C.I.E., D.C.L.

The Right Hon. the EARL OF ELGIN and KIN-
CARDINE, K.G., G.C.S.I., G.C.I.E., P.C., LL.D.,
D.C.L.

The Right Hon. BARON REAY, K.T., G.C.S.I.,
G.C.I.E., P.C., LL.D.

The Right Hon. EARL CURZON OF KEDLESTON,
ETC., P.C., G.C.S.I., G.C.I.E., D.C.L., LL.D., etc.

SIR CHARLES STUART DAVLEY, K.C.S.I., I.S.O.

II. H. the NIZAM of HYDERABAD, G.C.S.I.

II. H. the GANESHWAR of BARODA, G.C.S.I.

II. H. the MAHARAJA of MARWAR JODHPUR
G.C.I.E.

II. H. the MAHARAJA of UDAIPUR, G.C.S.I.,
G.C.I.E.

II. H. the MAHARAJA SCINDIA of GWALIOR,
G.C.S.I., G.C.V.O., LL.D., A.D.C.

The Right Hon. Lord HARRIS, G.C.I.E.

SIR JAMES LYALL, K.C.S.I.

II. H. the MAHARAJA of TRAVANCORE, G.C.S.I.,
G.C.I.E.

II. H. the MAHARAJA of JAIPUR, G.C.S.I.,
G.C.I.E., G.C.V.O., LL.D.

The Hon. the MAHARAJA of VIZIANAGRAM,
K.C.I.E.

II. H. the MAHARAJA of JAMMU and KASHMIR,
G.C.S.I., G.C.I.E.

II. H. the MAHARAJA of DAREHANGA, K.C.I.E.

II. H. the Hon. MAHARAJA of BENARES, G.C.I.E.

Vice-Patronesses.

II. R. H. THE DUCHESS OF CONNAUGHT AND STRATHMORE, C.I.

The Most Hon. the DOWAGER MARCHIONESS of
DUFFERIN and A.Y. & A., C.I.

The Most Hon. the MARCHIONESS of LANSDOWNE, C.I.

The Lady REAY, C.I.

The Right Hon. the COUNTESS of LITTON, C.I.

The Lady RANDOLPH CHURCHILL, C.I.

II. H. the MAHARANI of JODHPUR.

The Lady WENLOCK, C.I.

Lady DAVLEY.

Lady LYALL.

Lady ELLIOTT.

II. H. the NAWAB BEGUM of BHOPAL, C.I.

II. H. MAHARANI KEMPANANJAMMANI AVARU

VANIVILAS SANNIDHANNA of MYSORE, C.I.

II. H. the NAWAB KHATUN-NISA BEGUM of the
CANARAT.

The Most Hon. the MARCHIONESS of RIPON,
C.I.

The Lady EMMA BARING, C.I.

Lady GRANT DUFF, C.I.

Lady ANCHUTSON.

II. H. the NAWAB SHAMS-I-JAHAN BEGUM
SAHIBA of MURSHIDABAD, C.I.

The Lady AMPHILL, C.I.

II. H. the NORTHCOOTE, C.I.

II. H. the MAHARANI CHINKU RAJA SAHIBA
of GWALIOR.

II. H. the MAHARANI SAKHUJA RAJA SAHIBA
SCINDHIA ALIJA BAHADUR, of GWALIOR, C.I.

II. H. the MAHARANI of MUTWA.

The Right Hon. the COUNTESS of Minto, C.I.

And such other persons of position and influence, both English and Indian, as may from time to time be specially invited by the Central Committee to become Vice-Patrons and Vice-Patronesses of the Association.

CENTRAL COMMITTEE.

Lady President.

HER EXCELLENCY THE LADY HARDINGE OF PENSHURST, C.I.

Members.

The Hon'ble Sir S. H. BUTLER, K.C.B.I., C.I.E.,
Member of the Viceroy's Council.
The Hon'ble Sir ALI IMAM, K.C.B.I., *Member*
of the Viceroy's Council.
The Hon'ble Sir R. CRADDOCK, K.C.B.I., *Mem-*
ber of the Viceroy's Council.
The Hon'ble Surgeon-General Sir C. P. LUKIS,
K.C.B.I., K.H.S., M.D., *Director-General of the*
Indian Medical Service.
The Hon'ble Lt.-Col. Sir A. H. McMAHON,
G.C.V.O., K.C.I.E., C.B.I., *Secretary to the*
Government of India, Foreign Department.

Mrs. J. WENTAS GRANT, M.D.
Miss M. O'BRIEN, M.D., D.B.
Raja Sir HANNAH SINGH, K.C.I.E., Ahluwalia
of Kapurthala.
The Hon'ble Sir G. R. M. CHITNAVIS, K.C.I.E.
The Hon'ble Nawab MUMTAZ-UD-DAULA, Sir
MUH'D FAIZAZ ALI KHAN, K.C.V.O., K.C.I.E.,
C.B.I.
The Hon'ble Maharnja-Dhiraj Bahadur Sir
BIRAJ CHAND, MAHARAJ, of Bardwan, K.C.B.I.,
K.C.I.E., I.O.M., etc.
Lt.-Col. Sir J. R. ROBERTS, Kt., C.I.E., I.M.S.,
Surgeon to His Excellency the Viceroy.

Honorary Secretary.

Lt.-Col. Sir J. R. ROBERTS, Kt., C.I.E., I.M.S., Viceroy's Camp.

Permanent Joint Secretary.

E. J. BUCK, Esq., Viceroy's Camp.

Permanent Assistant Secretary.

W. G. A. HANNAHAN, Esq., Viceroy's Camp.

Honorary Treasurer.

Colonel B. W. MARLOW, C.I.E., Military Accountant-General.

Honorary Auditor.

M. F. GAUNTLETT, I.C.S., Comptroller and Auditor-General

Honorary Solicitors.

Messrs. SANDERSON & Co., Calcutta.

Bankers.

BANK OF BENGAL, Calcutta.

Messrs. COUTTS & Co., 59, Strand, London.

Honorary Secretaries to Branches of the Association.

United Kingdom Branch.

THE MOST HONOURABLE THE DOWAGER MARCHIONESS OF DUFFERIN AND AVA, V. & A.,
C.I., Clondeboye, Ireland.

For the Scholarship Department.—Secretary, Mrs. Bell, 12, St. Leonard's Road, Ealing,
London.

Assam.

Major E. C. MACLEOD, I.M.S., Shillong.
Baluchistan.

Lt.-Col. A. L. DUKE, I.M.S., Quetta.
Bengal.

Capt. J. H. BURGESS, I.M.S., Govt. House,
Calcutta.
Berar.

Major J. C. S. OXLEY, I.M.S., Amraoti.
Bihar and Orissa.

C. B. BAYLEY, Esq., G.V.O., Govt. House, Ranchi.
Bombay.

Capt. T. C. LUCAS, R.A.M.C., Govt. House, and
JERANOTR DOBANHOY FRAMJEE, Esq., Bar-
at-Law, I.S.O. (Joint Hon'y. Secretaries).

U. P. of Agra and Oudh.

B. H. BOURDILLON, Esq., I.S.O., Allahabad.

Burma.

Major A. FENTON, I.M.S., Rangoon.

Central Provinces.

N. G. SARKAR, Esq., Nagpur.

Madras.

Capt. H. STOTT, I.M.S., Govt. House.

Mysore.

P. S. ACHYUTA RAO, Esq., Bangalore.

N.W. F. Province.

Lt.-Col. T. W. IRVINE, I.M.S., Peshawar.

Punjab.

Colonel E. C. BAYLEY, I.A., C.I.E., Govt. House,
Simla or Lahore.

The National Association for Supplying Female Medical Aid to the Women of India.

Twenty-ninth Report of the Central Committee for the year 1913.

IN presenting its Twenty-ninth Annual Report of the National Association for providing Female Medical Aid to the Women of India the Central Committee is glad to be able to again present a statement indicating steady progress throughout the country.

The objects for which the Victoria Memorial Scholarships Fund was inaugurated are now being steadily attained in various centres in India, and a separate account of the work accomplished in this direction is again given under a special heading at the end of this volume.

The report contains the statistics and details of the main operations of the Fund during the past year, and it also includes a précis of the work accomplished in Baluchistan, Mysore, North-West Frontier Province and certain Native States which do not publish separate reports. Those who are interested in the details of relief which has been afforded in Bengal, Berar, Bihar and Orissa, Bombay, Burma, the Central Provinces, Madras, the Punjab and the United Provinces of Agra and Oudh can obtain the provincial reports through the respective Honorary Secretaries of these branches.

Her Excellency the Lady Hardinge of Penshurst as Lady President of the Central Committee made inspection visits to a number of hospitals during the year. Among these institutions were the hospitals at Delhi, Simla, Calcutta, Madras, Hyderabad, Bangalore, Mysore, Cuttack and Gaya. Her Excellency has again been much gratified at seeing the progress which has been made in many directions, and at the excellent work which is being performed by Lady Doctors.

Women's
Medical
Service for
India.

The main work with which the Central Committee has been occupied during the year has been the organisation of the Women's Medical Service for India, in aid of which the Secretary of State has sanctioned an annual grant of Rs. 1,50,000.

The Central Committee has for two or three years past continually urged the Government of India to assist it in inaugurating this Service, and although the subvention which has been sanctioned is not so large as it could wish, it has hopes that in due course when its usefulness is fully proved that further assistance may be forthcoming from the Imperial revenues.

The General Rules and Regulations of the Service together with those which have been laid down for the Provident Fund, and for Travelling and Leave have been made known during the past year, and are again published in the appendices of this report for general information.

These rules are based on suggestions and opinions which were received from the Provincial Committees, and were also submitted to the Secretary of State for India before they were finally settled. They will, it is hoped, be found to be satisfactory in their application, but will be revised from time to time as experience or local circumstances may require.

The names of the ladies who were first selected for the Service were published in December last, and will be found in Appendix VI of this report. The new Service started from the 1st January 1914.

The Central Committee has very carefully considered the claims and recommendations of all applicants, and needless to say the applications for admission to the Service have far outnumbered the posts which the Committee has had at its disposal.

In cases where it provides the salary of a Lady Doctor, who is a member of the Women's Medical Service for India, the Central Committee has particularly requested the Provincial and Local Committees concerned to see that she is given the services of a competent Assistant Surgeon to help her in her labours. Experience in the past has shown that this is an essential point, and the Central Committee itself desires to emphasize in this report its strong opinion in the matter.

All medical women who are desirous of joining the Women's Medical Service for India are invited to send in their applications and recommendations to the Honorary Secretary, Viceroy's Camp, in order that their names may be duly registered and their claims may be considered as vacancies in the Service occur.

The fact that a Women's Medical Service for India has come into being will in no way interfere with the efforts which the Dufferin Fund has always

made to provide Lady Doctors for various centres in the country, to assist struggling institutions, and to give scholarships to deserving students who enter upon a medical career. For the benefit of ladies who may not be enrolled in the Service proper, but who are otherwise engaged in furthering the aims and objects of the National Association for providing Female Medical Aid to the Women of India the Committee would repeat the remarks already contained in earlier reports :—

The funds at the command of the Association, as will be seen from the financial statements later on, are strictly limited, and it should be clearly recognised by those who accept posts under the Fund that it is essentially a charitable and more or less struggling Association which endeavours to provide as full medical relief as possible to women of all classes in India with a comparatively very small income.

The Committee thinks it well to again point out that, owing to the steady annual increase in the number of ladies who possess the higher degrees in medicine, the Association cannot guarantee to provide employment carrying a suitable remuneration immediately it is required, or indeed within any given period. The number of appointments, apart from those which come under the Women's Medical Service, and especially those carrying the recognized pay of the higher grade, are strictly limited, and the most the Central Committee can do is to endeavour to fill such vacancies as arise with the best material at its disposal. In all cases where the Central Committee is asked to recommend a lady for a post in a Native State, or for a particular hospital, the claims of every registered candidate for employment receive full and impartial consideration. It should also be borne in mind that the final selection and appointment of candidates for a considerable number of posts, as well as the terms during which it is considered expedient they should hold those posts, rests with the local authorities concerned. The fact, moreover, that the Central Committee has assisted students, who have been recommended by the Principals of Medical Colleges in India as likely to prove successful medical women, with scholarships during their college careers, does not in any way render the Committee responsible for providing them with permanent employment under the Association. Nor does it guarantee to provide with first grade posts immediately on their return to India ladies whom it may have recommended to the United Kingdom Branch as worthy of assistance in order that they may take the higher degrees in medicine. It has happened sometimes during past years that ladies who have not been altogether satisfied with their posts have resigned them somewhat suddenly, sometimes before they have taken the precaution of securing the promise of a

new appointment. As the supply of medical women continues to be considerably in excess of the demand, especially where the higher paid posts are in question, the Committee takes this opportunity of again warning all ladies who are in any way connected with the Fund that they run considerable risk in hastily throwing up appointments, however uncongenial they may appear to be.

The Central Committee would also remind Honorary Secretaries of Provincial and Local Committees that a list of candidates for employment is always maintained in its office, and to state that if ladies who wish to proceed on leave would notify their desire as early as possible to their Local or Provincial Committee, it would much facilitate the work of those who have to arrange for filling their posts during their absence.

Scheme for
a Medical
College,
Hospital and
Training
School for
Nurses.

Her Excellency the Lady Hardinge has given much thought and attention during the year under review to the establishment of a Medical College and Hospital for Women and for a Training School for Nurses at Delhi. The experience gained by the Dufferin Fund has shown how necessary both of these institutions have become, and Delhi has been chosen as the centre, partly because it was the scene of Their Imperial Majesties' recent visit to India, and partly because the cities of Calcutta, Bombay, Madras, Lucknow and Lahore already have big Medical Colleges and Hospitals.

Lady Hardinge has already been promised about fifteen lakhs of rupees by the Princes of India towards the initial cost, and the Government of India have agreed to provide the annual maintenance charges after the buildings have been erected.

Full details of the proposed scheme will be found in Annexure I of this report.

Change
amongst
Lady Doctors.

Amongst the most important changes during the year 1913 may be mentioned the following :—

Miss A. Paul, L.M.S., was in charge of the Akola Women's Hospital from the 1st September 1913, the date it was opened. Since the close of the year Miss J. E. George, L.R.C.P. & S., has taken over charge.

Miss M. Conway, L.R.C.P. & S., resigned her appointment at Amraoti on 16th May 1913 and Miss McMillan rendered her services gratuitously up to the 23rd May 1913, when Miss I. Keess, L.M.S., succeeded and remained in charge up to the end of the year.

At Hyderabad (Sind) Miss A. M. Robinson, M.B., Ch.B., was in charge up to 31st March 1913 when she resigned. Mrs. Martin Ellicott, M.D., the permanent incumbent, on leave, was recalled, but owing to ill health did not rejoin till 6th June 1913.

Miss M. A. D. Naoroji, M.B., Ch.B., Shikarpur (Sind), availed herself of 10 months' leave from the 11th June 1913 and Miss M. E. Graham, L.R.C.P., was appointed in her place.

Miss K. M. O'Neill, M.B., held charge of the Dufferin Hospital, Nagpur, from the 23rd May 1913, *vice* Mrs. G. E. O'Brien, M.B., resigned.

At Dehra Ismail Khan, Miss A. M. Headwards, L.R.P. & S., availed herself of leave from 1st January to 8th July 1913, but owing to illness could not resume work on expiry of leave. Miss J. Perry, L.M.S., officiated from 30th October 1913 up to the end of the year.

Miss Walls, L.R.C.P. & S., held charge of the Victoria Caste and Gosha Hospital, Madras, from the 1st December 1912 to the 25th February 1913, when she was relieved by Miss Hendrie, M.B., Ch.B., who remained in charge up to the end of the year.

Miss F. A. Scott, L.R.C.P. & S., was appointed to the Jubilee Hospital, Nellore, from the 22nd July 1913.

Miss M. J. Balfour, M.B., Patiala, resigned on the 22nd June 1913 and Miss S. Cama, M.D., succeeded her.

Miss I. Keess, L.M.S., was in charge of the Minto Hospital, Malakand, up to 15th May 1913, and Miss E. Keith, Sub-Assistant Surgeon, carried on the work from the 25th May to the 26th July 1913. Since then no Lady Doctor has been appointed, but one is shortly expected.

In the United Provinces Miss K. Bonnar, L.R.C.P. & S., Allahabad, was on leave throughout the year. Miss J. E. George, L.R.C.P. & S., Benares, availed herself of 7½ months' leave from the 1st April 1913 and Miss D. Pratt, M.D., was appointed in her place. Miss M. O'Brien, M.B., B.S., Lucknow, took six months' leave from the 10th July 1913 and Mrs. E. Hutton, L.R.C.P. & S., acted for her. Miss V. E. Field, L.R.C.P. & S., was appointed to the Lady Lyall Hospital, Agra, in August 1913 and Miss C. L. Houlton, M.B., B.S., on Reserve duty, Agra, in October 1913.

In Appendix III are given details of women and children treated by female agency in *zenana* hospitals, wards and dispensaries throughout the country.

Patients
treated during
the year.

It will be seen that in Native States no less than 658,438 patients were treated in hospitals officered by women. This bears eloquent testimony to the generous support given by the Ruling Chiefs to the movement for providing female medical aid for women.

As the majority of these hospitals undoubtedly owe their origin to the efforts of the Dufferin Fund, and as a considerable number are now officered either by Lady Doctors nominated by the Central Committee, or by ladies

who were materially assisted in their medical studies by the Association, the Committee considers that it has every right to take to itself substantial credit for the success attained in this direction.

The actual number of women treated in (a) hospitals mainly controlled and aided by the Dufferin Fund was 281,124 and the number treated in (b) hospitals assisted by the Dufferin Fund was 405,563.

The work accomplished by Missionary Societies is not here reviewed, and the tables contain no details of patients treated by many midwives who have received their training through the Countess of Dufferin's Fund.

There are, moreover, a number of private female practitioners in India, many of whom have been at some time or other connected with the Association, and some of whom have received scholarships and direct assistance at its hands; but the Association is not in a position to obtain details of the useful work accomplished by these ladies.

The Committee trusts that Honorary Secretaries and Lady Doctors will continue to see that returns are submitted on the principle which has been laid down by the Government of India for the State hospitals.

One of the purposes of the returns is the comparison they afford of the work accomplished in institutions of corresponding size and scope, but such comparison is difficult, or impossible, if in one case the figures representing patients treated are the number of the total *visits* or *attendances* of new and old patients, while in another they are the number of the *individuals* or of *new patients* only. If statistics are to be of any value, they must be compiled on one uniform basis. If, for example, the same person attends for 10 days, she should not be counted 10 times, but if she reappears as a fresh case she should be counted again. The returns should include both those patients remaining from the previous year and those admitted during the year under report. The Central Committee, having had its attention drawn to the probable inaccuracy of some of the returns, again desires to make the position quite clear.

An additional Appendix (IV) has been included in this report showing the total number of women and children treated during 1912 in all the hospitals and dispensaries in India. It will be seen that no less than 13,566,952 women and children were treated during the year.

Students.

The Committee has received lists from the Provinces giving the numbers of the students at present in the principal medical colleges and schools in India (Appendix I). These show that there are 55 European and Indian ladies training for the full M.B. course, 62 as assistant surgeons, 105 as hospital assistants, and 409 as nurses, *dais* and compounders.

The Central Committee assists a certain number of students in each provincial centre with scholarships to help them in their medical studies, but the demand for these awards continues to far exceed the number at the disposal of the Committee.

Of the 222 who are being trained in medical work, no less than 89 are being supported with scholarships provided by the Dufferin Fund, 56 are in receipt of Government scholarships, 20 are being trained with university or school scholarships, 19 are being educated at the expense of Native States and 4 are assisted by local District Boards and Municipalities.

All details regarding scholarships granted by the Central Committee, as also a short note of guidance for those who propose pursuing their studies in England, can be obtained on application to the Honorary Secretary of the Central Committee, or to the Principals of the Medical Colleges of Calcutta, Madras, Bombay and Lahore, and particulars regarding those given by Provincial Committees on application to the Honorary Secretaries of Provincial Branches.

The Assam Branch report is encouraging. The Central Committee continued their subsidies to four local branches in Assam, *viz*, Dhubri, Goalpara, Gauhati and Jorhat. Summaries of Provincial Branches.

The income from grants by Government and local bodies rose from Rs7,360 to Rs11,116 and the subscriptions from Rs105 to Rs3,180. Of this amount, a sum of Rs3,000 was contributed by the King Edward Memorial fund at Sylhet, and the balance was the annual contribution from the Rani of Bijni. The local Administration increased their grant from Rs3,000 to Rs4,000.

The attendance figures show a satisfactory increase of 12 per cent over those of the previous year. The decreases at Jorhat, Goalpara and Dhubri are due to the absence of Lady Doctors at those centres for varying periods during the year. Among new buildings erected may be mentioned quarters for the Lady Doctor at Sylhet, and a female ward at the Sadr dispensary there, while a Lady Doctor was posted to Nowgong and a European midwife to Shillong.

The Bengal Branch furnishes a most interesting and encouraging report. The working of all the hospitals taken as a whole shows steady and continued progress. The total number of patients treated, both in and out, far exceeds that in the previous year, and it is gratifying to note that in the majority of institutions a greater number of *purdanashin* ladies availed themselves of the medical relief provided by the Dufferin hospitals.

Her Excellency the Lady Carmichael continues to take keen and lively interest in all matters pertaining to the Dufferin Fund and the Bengal Committee record their grateful thanks for her valuable advice and assistance.

The management and control of the Surnomoyee Hostel, hitherto vested in the Executive Committee of the Bengal Branch and delegated by them to the Calcutta Committee of the Dufferin Fund, have, according to the new University regulations, to the effect that all hostels affiliated to the University must be under its control, been placed entirely in the hands of the Governing Body of the Medical College since February 1913, this transfer relieving the Bengal Branch of an expenditure of Rs. 1,752.

The amount of contribution paid to the Victoria Dufferin Hospital during the current year was Rs. 11,500 and that fixed for 1913-14 is Rs. 10,000.

Owing to the considerable expansion of the hospital, its requirements for the ensuing year have correspondingly increased. The budgetted expenditure is Rs. 53,037, whereas the income is estimated at Rs. 32,130, including the grant of Rs. 10,000. The Government have been approached for a special grant of Rs. 21,000 and the matter is under consideration. An *ad interim* grant of Rs. 3,000 has, however, been sanctioned to meet the most pressing demands.

An extension of the present nursing block was carried out affording accommodation for *purdah* nurses of high estate in furtherance of the scheme in which Her Excellency the Lady Carmichael has taken such a keen interest. Application having been made to the Government of Bengal for pecuniary aid, they have sanctioned a special grant of Rs. 4,454. Her Excellency the Lady Hardinge has very kindly promised to head a subscription list with a donation of Rs. 1,000 towards the cost of providing another wing or block for this purpose. Three pupils are now under training, and it is hoped that this initial incentive will result in many high caste women coming forward and so becoming a means of usefulness to *purdah* ladies, whose caste rules preclude them from engaging the services of nurses of lower castes.

A further sum of Rs. 50,000 has been invested in the Sukhpur Wards Estate in Bhagalpur at 6 per cent. per annum. This year the financial condition of this Branch is all that can be desired. All the available money at its disposal has since been invested at 6 per cent. per annum.

Improvements have been carried out in the Lady Dufferin Zenana hospital at Bankura, Taherunnessa hospital at Bogra and women's wards attached to the Faridpur charitable dispensary.

The Calcutta Committee, in expressing their grateful thanks to the subscribers to the Victoria Dufferin Hospital funds for their continued kind interest and support, heartily thank the Lady Hardinge Linen League, the Bengal Work Society, the St. Andrew's Dorcas Society for linen, the Oxford Mission and several ladies and gentlemen for their kind help and gifts. Another interesting donation which the Committee acknowledge with

best thanks, is a sum of R1,038 collected and presented by children to Her Excellency the Lady Hardinge at the opening of the new ward for supplying the ward with linen. A further sum gratefully received for the same purpose was R100, part of the proceeds of a theatrical performance.

The *Berar* report shows further increase in the work done at the Amraoti hospital during the year. Two new women's hospitals one at Shegaon ("The Sai Bai Moti") and the other at Akola were opened on the 16th April and 1st September, respectively; and at a meeting in August it was resolved to establish a women's hospital at Yeotmal. Some R45,000 have been promised and the greater part of this sum collected. The good work already performed at the Shegaon hospital shows that Mr. P. G. Mote's generous gift referred to in last year's report is being appreciated. An operation room and other necessary buildings will be added to this hospital through the generosity of Mr. Mote and other residents of the neighbourhood. The increased expenditure at this hospital has been fully met by increased grants from the Local Administration, local bodies, and a grant of R350 annually from the Berar Branch of the Dufferin Fund.

Since the close of the year, Miss J. George of the Women's Medical Service has taken charge of the Akola hospital and the Provincial Committee are confident that the Dufferin work in Akola will soon be placed on a firm basis.

The *Bihar and Orissa Branch* reports that the annual grant of R1,080 transferred by the Bengal Branch for 3 years continues to be the only income at the disposal of this branch. The branch has the following institutions under it:—The Gaya Lady Elgin Zenana Hospital, the Bhagalpur Rani Shubatarini Hospital, a women's ward attached to the Monghyr Hospital and Dufferin Hospitals at Darbhanga and Bettiah. Small annual grants were made to the women's ward attached to the Monghyr Hospital towards the pay of the Lady Doctors attached to the Puri Pilgrims Hospital, to the Deoghur Dispensary, to the Sambalpur Dispensary and to the Jamui Dispensary in Monghyr.

An application was received during the year from the Honorary Secretary, Rani Srimati Dispensary Committee, Balasore, for a grant of R4,000 for the two Cottage hospitals in connection with the treatment of female patients, and for an annual grant of R400 towards the pay of the Lady Doctor attached to the Dispensary. The application was supported by the Civil Surgeon and the Inspector General of Civil Hospitals, but had to be rejected for want of funds.

The Hazaribagh Lady Dufferin Hospital was abandoned with effect from the 1st April 1913, as in February 1912 the Lieutenant Governor of

Bengal, agreeing with the Civil Surgeon, expressed the opinion that it should be abolished, as the Dublin University Mission had started a *purdahnashin* hospital and it was thought unnecessary to maintain another hospital at the expense of the Lady Dufferin Fund.

In the *Bombay* report the Committee offer a hearty welcome to Lady Willington who has assumed the office of President and are pleased to announce that the year has again been one of steady progress and prosperity in its special work and objects, one of which is the training and supply of female nurses and midwives for women and children in the city of Bombay and the mofussil.

Financial aid was given during the year to Ahmednagar, Kanara, Sadra, Viramgam and Sholapur, and encouraging work is being done in several districts.

The report states that the Bombay Branch is much indebted to the Executors and Trustees of the late Mr. N. M. Wadia for their annual grant of Rs 7,000 which has enabled the nurses' training school to be run at full strength for the last three years; and the Committee allude to the loss they have suffered by Sir N. G. Chandavarkar's departure to Indore.

The *Burma* report states that 739 obstetrical cases were treated in the Dufferin Hospital at Rangoon against 656 in the previous year. Although the number of in-patients shows an increase from 678 to 791, the out-door patients fell from 16,282 to 13,199. These figures include, respectively, 212 and 3,926 Burmese.

Miss H. J. C. Maclaren was in charge of the hospital throughout. Mr. A. D. Keith acted as Honorary Secretary till the end of September, when he was succeeded by Major A. Fenton, I.M.S. Colonel S. H. Douhai, I.M.S., was Honorary Treasurer in the early part of the year and on his resignation the Honorary Secretary took over his duties.

The financial condition of the branch is still causing the Committee much anxiety. Although the deficit is not so great as last year, the income being Rs 27,004 and expenditure Rs 27,716, many necessary works have had to be left in abeyance. The receipts from Hospital patients amounted to Rs 11,109, while the public donations and subscriptions were only Rs 1,982. The Central Committee note with pleasure the personal interest taken in the welfare of the Hospital by Mrs. Twomey, Honorary Secretary of the Ladies' Committee, who raised a sum of Rs 2,958. This sum enabled the Committee to carry out certain improvements, and to replenish the stock of linen.

The *Central Provinces* report shows that the operations of the Fund were confined to Nagpur, Jubbulpore and Saugor.

There were increases in the number of patients treated both at Nagpur and Jubbulpore, thus testifying to the increased popularity of the institutions at those places. At Saugor there was, however, a considerable decrease, mainly due to the facts that the dispensary there was without a Lady Doctor for about three months and that the year was comparatively healthy.

A legacy of £500 left by the late Mr. William Brittain Jones was received during the year.

The *Madras* report says it is glad to record marked progress, and adds that the definite formation of the Women's Medical Service is an eventful landmark in its history which cannot fail to influence for good the medical relief afforded to the Women of India. The higher medical education of women to the standard of the University M.B., B.S., degree is receiving the close attention of the Branch. With the practical certainty of an assured professional future, and the prospects of appointment to such a Service as the Women's Medical Service, it is hoped that some of the ablest women in the Presidency will in future take up the Medical profession.

Everywhere in the Province there is a demand for medical women which it is hoped will be met in the near future.

The report runs :—"The backbone of the whole Dufferin Fund Scheme is medical tuition. We cannot get on without medical women; their numbers are limited, and we have to bear in mind that those who get married, as a rule, fall out of the ranks of workers. The duty of the Fund, then, so far as medical tuition is concerned, will be to keep the subject before every local fund board and municipal council and every Indian gentleman, until every town and Native State is supplied, or until they recognise their duties so far that our reminders will be unnecessary. This period may, we can only trust, be not far off: with its advent the main work of the Fund will happily cease to exist."

Considerable advance has been made towards the objects the Provincial Committee have in view as regards the Victoria Caste and Gosha Hospital, namely, to equip it as the premier hospital for Caste and Gosha women in Southern India and to render it suitable for the post-graduate training of the ablest Dufferin Fund scholars as House Surgeons. The staff are highly qualified and efficient. Extensive structural alterations estimated at somewhat over a lakh have become necessary, and Her Excellency the Lady President's appeal on behalf of these requirements has been met with an immediate, generous and whole-hearted response. A site has also been

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granted by Government for the new quarters for the Assistant Superintendent and the staff and pupil nurses. The hospital treated 18,581 patients during the year, of which 913 were maternity cases, and 2,756 operations were performed. Five beds were permanently endowed during the year at the hospital by the Raja of Ettaiyapuram, Mr. P. S. Chettiyar, Mr. Chatturbhujadas, Mr. G. Venkatapati Nayudu and the Rani of Vizianagram, and subscriptions and donations during the year amounted to Rs40,000.

The Madras report has been remodelled and a good deal of useful information is now incorporated on a systematic basis.

The *Punjab* report states that the monthly grant of Rs325 was continued to the Lady Aitchison Hospital during the year, and the Lady Lyall Home for female students was again lent to the Mayo Hospital authorities for nurses' quarters. A bungalow was also taken for the students studying at the College, the rent of which was paid by the Hospital authorities. The cost of maintaining this bungalow was Rs382.

The Punjab Government contributed Rs2,100 to the Association, and subscriptions and donations from individuals amounted to Rs1,079 as against Rs1,201 in the previous year; Rs240 were contributed by the District Board, Rawalpindi; Rs192 by the District Board, Gujranwala; and Rs180 by the District Board, Attock, for female medical tuition. A sum of Rs291 was expended on scholarships.

The actual receipts of the Branch in 1912 were Rs8,302 and in 1913 Rs8,553, while the expenditure in 1912 was Rs6,267, and in 1913 Rs5,996. The local reports show that good work is being done in several districts in affording medical relief to women.

The *United Provinces* report gives the following interesting particulars. The increase both in the in-door and out-door departments during the previous year has been maintained during the year under review. The increase is the more remarkable as the malaria incidence during the year in every class of hospital throughout the Province was considerably less than in the years 1912 and 1911.

The number of visits paid by Lady Doctors and female sub-assistant surgeons throughout the Province during the last two years to women at their homes was 5,927 and 6,290 respectively.

The midwifery cases have steadily increased from 1,022 in 1910 to 1,798 in 1913. It is satisfactory to note that whereas Meerut had a blank return in 1912 it shows no less than 138 cases in 1913. Cawnpore and Benares have, however, done very little work in this line. It is possible that most of the midwifery cases at these stations are treated at the hospitals and that the

presence of a large number of private medical practitioners at these centres are factors to reckon with. At Agra a large number of cases are confined in the Maternity Hospital.

Lady Doctor Mrs Hardy of Bareilly heads the list of selected operations performed with 95 operations, then come Mrs Griffiths of Meerut with 94, Miss Drummond of Allahabad, 89, and Miss Singh of Fyzabad, 87. Of these 72, 93, 50, and 21 were obstetric cases.

During the year two new dispensaries not affiliated to the provincial branch were opened, *viz.*, the Sahaswan women's dispensary at Budaun and the Shamshabad dispensary at Farrukhabad. The dispensary at Sahaswan was opened in July by the District Board in a room of the men's dispensary.

Several most essential additions, alterations and improvements have been carried out during the year at Barabanki, Benares, Cawnpore (where the Local Government have granted Rs.5,000 towards the construction of an European maternity ward, which will meet a pressing want), Lucknow, Meerut, Mirzapur, Partabgarh, Pilibhit and Saharanpur. The scheme for a new hospital at Fyzabad will very shortly be put in hand; the present buildings afford but scanty and unsatisfactory accommodation and are unworthy of a large city like Fyzabad. Family wards are required at Shahjahanpur as well as an operating room. The operations at the Women's hospital are at present performed in the adjoining Sadr hospital which is not satisfactory.

The following staff is employed at the various hospitals in the Province: Nine English qualified Lady Doctors, five Licentiates in Medicine and Surgery and nine certificated practitioners. Fifty-three female Sub-Assistant Surgeons are also entertained. They are employed in independent charge of the smaller hospitals, while a few are in subordinate charge at the larger hospitals under Lady Doctors.

Lady Doctors Miss Field and Miss Houlton joined the Association from England during the year. The former was selected to fill the appointment of third Lady Doctor at Agra, the status of which was raised to that of the first class in 1913. The latter has been attached to Agra as the reserve Lady Doctor since her arrival. The effect of both appointments has been of great advantage to the School and Major O'Meara speaks most highly of the zeal and energy these two newly joined Medical women are infusing into the work of the School and hospital.

Miss K. Bonnar, L.R.C.P. & S., and Miss J. E. George, L.R.C.P. & S., availed themselves of leave during the year. Lady Doctors Miss Leach,

Miss O'Brien, Miss Watts, Miss Commissariat and Miss Pratt were appointed to the Women's Medical Service for India from the 1st January 1914.

At the annual examination of the Agra Medical School held in April 1913 twenty students, against sixteen in the previous year, appeared for the final examination. Of these thirteen passed against ten in 1912, and of the remaining 7 one was re-examined and passed in October 1913 and the other 6 will be re-examined in April 1914.

Eighteen (against 21 in 1912) second year pupils appeared for the junior qualifying examination, of whom 8, against 7 in the preceding year, passed in all subjects.

Twenty candidates (against 27 in 1912) appeared for admission into the School on the 1st August 1913, of whom 15 were selected for admission. One left during the year, and of the remaining 14, ten are Dufferin Scholars, one is financed by the Central Provinces, one by the Almora District Board and two are private students. One female student is studying in the Assistant Surgeon Class of the Lahore Medical College, and five in the King George's Medical College, Lucknow. These receive scholarships from Rs20 to Rs30 from the MacDonnell Fund. Two of the lady students of the M.B. class at the Lucknow College were promoted from the 1st to the 2nd year and two were admitted to the College after passing the Preliminary Scientific Examination for the M.B., B.S. The student in the License class who failed in Anatomy in June was successful in December.

In connection with the general scheme under consideration by the Government of India for the training in this country in medicine of women by women, the possibility of making the female side of the Agra Medical School self-contained, with a staff composed entirely of women, was considered during the year under review. The question of provincializing the female branch of the School, while leaving the Lady Lyall and Maternity Hospitals under the control of the Dufferin Fund Committee, was also the subject of consideration and a scheme will shortly be submitted to Government embracing both points. The Inspector-General of Civil Hospitals makes some pertinent comments in connection with these two points, as regards the increase necessary in the present number of teachers and the training they should undergo; also the absolute necessity of raising the Standard of the School for female medical students. Although it is said that the Agra female students are with a few exceptions lacking in general education, etc., and in consequence are frequently found lacking in their studies, it is gratifying to note the favourable opinion expressed by the Inspector-General as regards the teachers to the following effect:—"These

remarks might appear to reflect upon the general management and administration of the Agra Female Medical School. This is not so. The Medical women we have had there as teachers and lecturers have been and are ladies in possession of the highest European diplomas, full of zeal and enthusiasm, who have devoted themselves with a whole-hearted energy to this work of instruction."

The Inspector-General inspected 36 female medical institutions during the year. Excellent work is being done at the Fyzabad Hospital; but the Provincial report runs: "It is quite lamentable to think that work in this institution is restricted and hampered by the lack of the most necessary accommodation. The hospital is always full and double the number could be admitted if there was room. The work of the hospital does Miss Singh great credit." The Meerut Hospitals except Agra and Benares. A form one of the best Dufferin Hospitals except Agra and Benares. A considerable number of minor gynaecological operations are performed at this hospital which is always satisfactory to note in a women's hospital. Excellent work is being done at the Dufferin Hospitals at Agra and the greatest credit is due to Major O'Meara and to Dr. Watts and her able staff for the very satisfactory advance made. The increase of abdominal operations of the first magnitude at these hospitals during the past two years has been extraordinary. Good work is being done at Allahabad where the number of patients has considerably increased during Miss Drummond's incumbency. In August the Ishwari Hospital at Benares had 39 cases, ten of which were in the maternity block. Of the twelve operation cases in the hospital, seven were cases of operation on the pelvic organs or their neighbourhood. The more of such operations one sees in a women's hospital the more evident is it that the proper functions of a Dufferin Hospital are being discharged in treating diseases peculiar to women. The amount of gynaecological work done at Bareilly is very good and steady progress has been made at Moradabad where excellent work is being done especially, in gynaecological work by Miss Johnstone. Although the Pilibhit Hospital is one of the most complete and best founded of all the smaller Dufferin Hospitals very little gynaecological work is done. Very little work of this kind is done at Gonda, Dehra Dun, Muttra, Etawah, Azamgarh and Mirzapur amongst many others that would make too long a list to enumerate.

The training of nurses, compounders and *dais* was carried on during the year at the centres of Agra, Allahabad, Benares, Cawnpur and Lucknow. The financial statement appended shows the income and expenditure of the Central Committee for the year 1913. The credit opening balance was Rs10,142-14-4, and the closing balance Rs20,873-12-10.

Financial
Status of the
Association.

The ordinary income of the Fund derived from interest on investments during the year amounted to R25,901, of which R1,233 pertains to Trust Funds.

During the year, the Government of India granted the Fund a subsidy of a lakh and a half of rupees towards meeting the cost of the "Women's Medical Service for India" which together with a sum of R5,000 was invested in Government Promissory Notes which cost R1,48,197-15-8 or a profit of R6,802-0-4. Certain investments at 4 per cent. were also disposed of for a sum of R77,770 and the amount utilised in meeting a loan of R4 lakhs to a Court of Wards' Estate at 6 per cent. per annum.

The ordinary expenditure of the Central Committee during the year was R42,384. The expenditure on grants-in-aid towards the object of the Association amounted to R16,894, of which the following are the principal items :—

- (1) R7,200 to the United Provinces Branch for the Agra Hospital and School ;
- (2) R4,290 to the Baluchistan Branch, towards the salary of a Lady Doctor at Quetta, and the expenses of the Lady Dufferin Dispensary at Fort Sandeman ;
- (3) R2,350 to the Central Provinces Branch, towards the salary of a Lady Doctor at Nagpur, and maintenance of the Elgin Hospital at Jubbulpore ;
- (4) R1,560 to the Assam Branch, towards the salaries of the midwives at Dhubri, North Lakhimpore, Gauhati, Goalpara and Jorhat ;
- (5) R1,534 on miscellaneous grants, of which R400 was paid to the Berar Branch, R874 to the North-West Frontier Branch, and R220 towards the salary of a female compounder for the Ripon Hospital, Simla.

The charges on account of salaries of Lady Doctors in India, debitable direct to the Central Committee, amounted to R2,681.

The Committee spent R6,518 on various scholarships, R2,176 on gratuities, and R204 on travelling expenses of Lady Doctors in India, R112 as prizes, and R7,500 as a contribution towards the reconstruction of the Dufferin Block of the Ripon Hospital at Simla.

The total working expenses of the Fund during the year amounted to R6,299.

Statement showing the total income of each Provincial Branch (Subordinate Branches included) for the year 1913, and the sources whence derived, viz. :—

Branches	(1) Funds invested.	(2) Interest from invested funds	(3) Donations from the public. Receipts from entertainments, etc. Contributions to hospital building funds, etc.	Total of columns (2) and (3)	(4) Grants from the Provincial Governments.	(5) Grants from District Boards	(6) Grants from Municipal funds	Total of columns (4), (5) and (6)
	R	R	R	R	R	R	R	R
Central Committee— Dufferin Fund .	7,57,058	24,628	1,373	25,901	..	..	..	..
Victoria Memorial Scholarships Fund	6,77,442	38,434	50	38,484	..	..	..	..
United Kingdom .	34,110	1,065	4,035	5,100	.	..	..	..
Bengal . . .	24,645	807	1,047	1,914	860	2,493	1,280	4,633
Punjab . . .	1,21,000	4,407	4,274	8,681	4,980	5,092	9,010	19,082
Madras . . .	44,100	2,212	60	2,272	12,000	..	..	12,000
Berar . . .	68,202	2,656	5,276	7,932	2,142	3,150	3,090	8,382
Baluchistan . .	23,800	987	1,032	2,019	4,170	180	3,846	8,196
Bombay . . .	1,52,075	5,798	6,291	12,089	1,986	9,576	10,461	22,023
Assam . . .	3,728	73	3,180	3,253	4,000	5,279	1,837	11,116
Central Provinces	1,75,410	8,370	26,583	34,953	1,440	6,346	4,460	12,246
United Provinces .	4,75,247	21,198	22,742	50,940	28,464	48,580	17,934	94,978
Burma . . .	.	88	1,982	2,070	6,000	.	6,146	12,146
Mysore . . .	11,000	659	..	659	..	..	..	..
Bihar and Orissa .	59,900	2,149	6,003	8,152	5,157	3,173	1,080	9,410
TOTAL	26,28,217	1,13,591	90,628	2,04,419	71,199	83,869	59,144	2,14,212

In concluding this Report, as the Committee think it advisable to furnish the means of estimating the value of the work done, it will be necessary to summarise some facts and figures of the operations of the Association.

Branches.—Including the United Kingdom Branch, there are fourteen Provincial Branches working under the Central Committee.

Committees.—Attached in some manner or affiliated to the Provincial Branches, there are about 140 Local and District Associations or Committees engaged in furthering the objects of the Association.

Hospitals.—It will be seen that in Appendix III statistics are given of the work accomplished in about 204 hospitals, wards and dispensaries of various kinds for the treatment of women, many of which are officered by women or have women attached to them, and a number of these institutions are directly governed by or affiliated to the Association: many, however, are quite independent of it; but all are doing the same work—providing *female* medical relief to the women of the country.

Approximate value of Institutions.—Including the cost of hospitals built by the Fund, a large number of buildings which have been presented to it, and others maintained from independent sources, the total value of institutions engaged in furthering the objects of the Association is now computed at close on 55 lakhs.

Patients.—In hospitals more or less controlled and assisted by the Association or at their homes, and in Native States, about 1,345,175 women and children received medical aid during the year under review

Lady Doctors.—Eighty-four Lady Doctors of the first grade, 72 second grade surgeons, and 663 hospital assistants, etc., besides a large number of midwives and nurses not included in these statistics, are employed in the various zenana hospitals and institutions in India.

Female Students.—The Branch returns show that, including nurses and compounders, 631 women are at present studying medicine or are undergoing training of some nature in various classes of the medical colleges, schools and hospitals in the different Provinces.

Receipts.—The total receipts of the Central Committee, since the Association was incorporated, have up to date amounted to ₹15,48,929. This does not include a sum of nearly seven lakhs subscribed towards the Victoria Memorial Scholarships Fund which was inaugurated by Lady Curzon in 1901-02.

Disbursements.—A sum of ₹7,77,373 has been re-allotted by the Central Committee to Provincial Branches, or expended in grants-in-aid within their limits for various objects.

Investments.—The amount now invested by the Central Committee, Provincial and District Branches, is ₹26,28,217.

United Kingdom Branch.—The Report of the United Kingdom Branch for 1913 shows that the amount received by it in subscriptions and donations was £257. It also has an invested fund of £2,274.

During the year, Miss M. O'Brien, M.B., B.S., joined as an additional Medical Member of the Central Committee.

Mr. W. G. A. Hanrahan, the Permanent Assistant Secretary to the Fund, was absent for a portion of the year on leave, and Mr. A. Duggan officiated during his absence to the satisfaction of the Central Committee.

J. R. ROBERTS,
Honorary Secretary.

SIMLA ;
15th May 1914.

ANNEXURE I.

Scheme for a Medical College and Hospital for Women, and for a Training School for Nurses at Delhi.

There is at present no Medical College exclusively for women in India. In these circumstances instruction in medical subjects has to be given in mixed classes at men's colleges, with the result that women of the right type will not come forward in sufficient numbers, and that, to obtain the more highly qualified lady practitioners, it is necessary to recruit to some extent from England. It is also necessary at present to send Indian medical students to England to complete their studies. This is considered a waste of power, and it is desired to remedy this state of affairs by providing in India the necessary machinery for training the women of the country to supply the existing demand for female doctors and nurses.

2. It is therefore proposed to establish at Delhi a College, with its attendant hospital, in which women will be taught by women to attend on women. Delhi has been chosen, first, because it was the scene of Their Imperial Majesties' memorable Durbar and the subscribers wish to commemorate Her Imperial Majesty's visit by the foundation of a Medical College and Hospital for Women; and, secondly, because, to possess a successful College, it is necessary to have in connection with it a well-filled hospital, which is alone possible in a big city. Calcutta, Madras, Bombay, Lucknow and Lahore already have big Medical Colleges and Hospitals. Delhi still lacks one.

3 It is also proposed to attach to the College and Hospital, under the same general management, but as a separate institution, the Training School for Nurses, for which Her Excellency the Lady Hardinge of Penshurst has already collected, or has been promised, a sum of approximately Rs. 25,000. This Training School will bear Her Excellency's name. The supply of trained nurses in India is unequal to the demand. This School is especially intended to train Indian women as nurses and midwives, and to send them out to hospitals and dispensaries, where they will be able to work among Indian women. If this should succeed, it is intended, in conjunction with training centres, in the hospitals of other localities throughout India to establish an order of Indian nurses, who with their families (if widows) will be maintained in nurses' homes attached to the hospitals, and will be available for nursing in private families as well as in public institutions.

4. On a rough calculation, and subject to the preparation of detailed plans and estimates, which have been prepared and considered during 1913, it is believed that the initial cost of—

(1) a College for 100 students ;

(2) a Hospital with 150 beds ; and

(3) a Training School, to take in 25 qualified nurses, and the same number of probationers

would be about 15 lakhs of rupees, exclusive of the value of the site occupied.

This sum has been arrived at as follows :—

		Rs
College	1. College buildings (including laboratories, dissecting room, museum, library and lecture room) .	2,75,000
	2. Hostels for students	1,00,000
	3. Quarters for Professors and superior staff	1,00,000
Hospital	4. Hospital Main Buildings	2,50,000
	5. Maternity Wards	50,000
	6. Cottage and Isolation Wards	1,00,000
	7. Out-patient department and dispensary (with arrangements for training compounders)	1,00,000
	8. Laundry, disinfecter and dairy	75,000
College and Hospital.	9. Compounders and servants	25,000
	10. Roads, fencing, surface drains, lighting, etc.	3,00,000
Training School for Nurses	11. Training School for Nurses	1,25,000
TOTAL .		15,00,000

5. It is further believed that the annual maintenance charges will amount approximately to one lakh of rupees a year. This calculation is based on the actual expenditure of similar institutions elsewhere.

6. To finance the project there is in hand, or has been promised, the Rs1,25,000 required for the Training School for nurses. For the remaining Rs13,75,000 to build the College and Hospital, the greater part has been already allotted. A site of 57 acres has been allotted by the Government of India in new Delhi for the Medical College buildings. Her Excellency laid the foundation stone of these buildings on the 7th March 1914.

7. Further it is intended to arrange that donors of Rs1,00,000 or over shall be allowed, if they so wish—

- (i) to designate definite buildings or parts of buildings as memorials and to name them as they may desire ;
- (ii) to receive special privileges in the way of accommodation in the College or Hospital for their nominees ; and
- (iii) to become Honorary Patrons of the Institution.

It may be possible to concede similar privileges to donors of under Rs.1,00,000; but until the details have been further worked out, it is not considered safe to make any promise as to this.

The following donations have been received for Her Excellency Lady Hardinge's Fund for the establishment of a Medical College for Women and Nursing Institute at Delhi up to the end of 1913.

	Rs
H. H. the Maharaja of Jaipur	3,00,000
H. H. the Maharaja Scindia of Gwalior	2,00,000
H. H. the Maharaja of Patiala	1,25,000
H. H. the Nizam of Hyderabad	1,00,000
H. H. the Maharaja Gaekwar of Baroda	1,00,000
H. H. the Maharana of Udaipur	1,00,000
Jodhpur Durbar through H. H. the Maharaja Sir Partab Singh	1,00,000
H. H. the Maharao of Kotah	1,00,000
H. H. the Maharana of Hutwa	1,00,000
H. H. the Maharaja of Darbhanga	58,437
H. H. the Maharaja Holkar	50,000
H. H. the Begum of Bhopal	30,000
Their Highnesses the Dowager Maharani and Maha- rani of Gwalior	30,000
H. M. Wadia Trust	25,000
H. H. the Dowager Begum Aga Khan	20,000
H. H. the Aga Khan	15,000
Lieutenant-Colonel H. Smith	500
TOTAL	14,53,937

A further promise has been received of an annual subscription of Rs. 3,500 from His Highness the Maharaja of Jammu and Kashmir, being the interest on a lakh in perpetuity, the first instalment having been paid in.

The Committee which is working out details in connection with this scheme consists of the following members:—

Chairman: Surgeon General the Hon'ble Sir C P Lukis, K.C.S.I., M.D

Members: The Hon'ble Mr. Malcolm Hailey, C.I.E.

Mr. H. T. Keeling.

Lieutenant-Colonel Sir James Roberts, Kt., C.I.E.

Mrs Wemyss Grant, M.D.

Mr. J. Begg, F.R.I.B.A.

Mr. C. W. E. Cotton, I.C.S.

Dr. K. A. Platt, M.B., B.S. (London), a Member of the Women's Medical Service for India—the Lady Principal Elect—is also being consulted freely as regards the construction, equipment and Staff of the Medical College and has been placed on special duty for that purpose.

THE COUNTESS OF DUFFERIN'S FUND,
CENTRAL COMMITTEE.

Statements of Accounts for the year 1913.

Accounts of Receipts and Payments of the Central Committee

Receipts.	Details.	TOTAL.
	<i>R a. p.</i>	<i>R a. p.</i>
<i>Cash Balance on 1st January 1913</i> . . . . .	...	10,142 14 4
<i>Income of Fund—</i>		
Subscriptions and Donations, Life Councillors . . . . .	...
Donation by Their Excellencies Lord and Lady Hardinge . . . . .	...
Subscriptions and Donations, Life Members . . . . .	...
Ditto ditto Miscellaneous . . . . .	...
Contributions from Branches	40 0 0	
Interest on Investments (except Trust Accounts)	24,628 3 11	
Sundry Receipts . . . . .	...
		24,668 3 11
<i>Trust Accounts—</i>		
Henry Fawcett Prizes	336 4 0	
Sir Dinshaw Maneckjee Petit	336 4 0	
Sir John Muir	560 7 0	
Gilchrist Scholarships . . . . .	...
		1,232 15 0
<i>Investments—</i>		
Sale proceeds of investments	77,770 0 0	
Repayments by Bhukailas Raj Wards' Estate No. 1, towards loan of Rs3,00,000.	35,000 0 0	
Repayment by Ghulam Rabbani Wards' Estate, towards loan of Rs5,000.	1,000 0 0	
		1,13,770 0 0
<i>Women's Medical Service for India—</i>		
Subsidy from Government for 1913-14 . . . . .	...	1,50,000 0 0
TOTAL . . . . .	...	2,90,814 1 3

DELHI :

The 11th May 1914.

M. F. GAUNTLETT,

Comptroller and Auditor General.

Progressive Account of the Central Committee of the Countess

RECEIPTS.	Ledger folio.	Amount.
		Rs. a. p.
<i>Income of Fund—</i>		
Subscriptions and Donations, Life Councillors . . .	91	3,59,000 0 0
Ditto ditto Life Members . . .	35	1,18,064 2 11
Ditto ditto Miscellaneous . . .	34	2,54,553 14 6
Contributions from Branches . . .	371	31,741 1 11
Collections in England . . .	29	31,787 1 9
Sundry Receipts . . .	113	1,762 1 6
Interest on Investments (except Trust Accounts) . . .	377	7,52,020 14 1
		15,48,929 4 8
<i>United Kingdom Branch—</i>		
Passage-money allowances . . .	232	598 12 6
<i>Trust Accounts—</i>		
Sir Dinshaw Maneckjee Petit . . .	87	6,511 7 4
Sir John Muir . . .	119	11,354 9 5
Henry Fawcett Prizes . . .	369	9,488 1 11
Gilchrist Scholarships . . .	319	50 0 9
		27,404 3 5
<i>Women's Medical Service for India—</i>		
Subsidy from Government for 1913-14 . . .	383	1,50,000 0 0
TOTAL . . .	...	17,26,932 4 7

DELHI :
The 11th May 1914.

M. F. GAUNTLETT,
Comptroller and Auditor General.

of Dufferin's Fund up to the 31st December 1913.

EXPENDITURE.	Ledger folio.	Amount.	
<i>Investments—</i>		<i>Rs.</i>	<i>a. p.</i>
Loan at 6 per cent. to Bengal Court of Wards, Shikarpur	353	1,96,000	0 0
" " " " " "	358	2,15,000	0 0
" " " " " "	363	51,000	0 0
" " " " " "	173	1,72,114	5 7
Loan to Kumar Gopika Bansa Roy Estate, Court of Wards	331	82,058	3 11
		7,49,472	9 6
Net charge on adjustment of former investments	200	27,982	11 4
<i>Objects of Fund—</i>			
Scholarships	72	75,902	2 9
Grants-in-aid, Miscellaneous	150	21,007	8 2
Bengal Branch	184	43,651	4 8
United Provinces Branch	345	2,01,000	3 0
Punjab Branch	269	80,409	7 7
Assam Branch	318	23,317	4 2
Central Provinces Branch	361	61,570	12 11
Burma Branch	216	15,104	11 0
Berar Branch	256	11,751	11 0
Chota Nagpur Branch	235	1,000	0 0
Bombay Branch	212	2,790	0 0
Madras Branch	251	11,398	13 3
Mysore and Coorg Branch	278	610	0 0
Baluchistan Branch	285	49,346	1 7
Karachi Branch	293	6,000	0 0
Sholapur Branch	286	5,100	0 0
Shikarpur Branch	273	438	11 4
Panch Mahals and Rewa Kantha Branches	213	547	5 4
Surat Branch	325	1,500	0 0
North-West Frontier Branch	287	874	3 2
		7,01,379	4 8
Gratuities, including Books and Medals	148	3,690	12 9
English Lady Doctors under Central Committee	363	47,188	7 1
Travelling Expenses of Lady Doctors in India	367	6,660	8 1
Dufferin Ward, Ripon Hospital, Simla	323	7,500	0 0
		71,018	11 11
<i>United Kingdom Branch—</i>			
Salaries and Travelling Expenses of Lady Doctors in India	202	1,915	2 9
<i>Expenses of Fund—</i>			
Advertisements and Printing	53	10,674	11 8
Telegrams	83	2,514	12 6
" " " " " "	121	1,064	9 7
" " " " " "	128	1,01,181	4 9
" " " " " "	352	8,002	6 1
" " " " " "	298	100	0 0
" " " " " "	170	3,137	1 2
Commission on realizing Interest, etc.	357	4,752	1 19
Office Building	353	1,500	0 0
		1,44,929	15 7
Suspense Account	199	6,300	0 0
		17,06,658	7 8
Cash Balance on 31st December 1913.	373	20,873	12 10
TOTAL	...	17,28,332	4 2

B. W. MARLOW, *Colonel,*
Honorary Treasurer.

Progressive Account of the Central Committee of the Countess

RECEIPTS.	Ledger folio.	Amount.
		Rs. a. p.
<i>Income of Fund—</i>		
Subscriptions and Donations, Life Councillors	91	3,59,000 0 0
Ditto ditto Life Members	35	1,18,064 2 11
Ditto ditto Miscellaneous	34	2,54,553 14 6
Contributions from Branches	371	31,741 1 11
Collections in England	29	31,787 1 0
Sundry Receipts	113	1,763 1 6
Interest on Investments (except Trust Accounts)	377	7,52,020 14 1
		15,48,929 4 8
<i>United Kingdom Branch—</i>		
Passage-money allowances	232	593 12 6
<i>Trust Accounts—</i>		
Sir Dinshaw Maneckjee Petit	87	6,511 7 4
Sir John Muir	119	11,354 9 5
Henry Fawcett Prizes	369	9,488 1 11
Gilchrist Scholarships	319	50 0 9
		27,404 3 5
<i>Women's Medical Service for India—</i>		
Subsidy from Government for 1913-14	383	1,50,000 0 0
TOTAL . . . . .	...	17,26,932 4 7

DELHI :
The 11th May 1914.

M. F. GAUNTLETT,
Comptroller and Auditor General.

of Dufferin's Fund up to the 31st December 1913.

EXPENDITURE	Ledger folio.	Amount
<i>Investments—</i>		<i>B a. p.</i>
Loan at 6 per cent. to Bengal Court of Wards, Shakarpura Estate	353	1,96,000 0 0
	358	2,15,000 0 0
	363	51,000 0 0
	173	1,72,414 5 7
	381	82,058 3 11
		7,49,472 9 6
Net charge on adjustment of former investments	290	27,982 11 4
<i>Objects of Fund—</i>		
Scholarships	72	75,902 2 9
Grants-in-aid, Miscellaneous	150	21,007 8 2
Bengal Branch	184	43,051 4 8
United Provinces Branch	345	2,01,069 3 9
Punjab Branch	269	80,469 7 7
Assam Branch	348	23,347 4 2
Central Provinces Branch	361	61,570 12 11
Burma Branch	216	15,104 11 0
Berar Branch	256	11,751 11 0
Chota Nagpur Branch	225	1,000 0 0
Bombay Branch	212	2,790 0 0
Madras Branch	251	11,398 13 3
Mysore and Coorg Branch	278	610 0 0
Baluchistan Branch	285	40,346 1 7
Karachi Branch	293	0,000 0 0
Sholapur Branch	286	5,100 0 0
Shikarpur Branch	273	438 11 4
Panah Mahals and Rewa Kantha Branches	243	547 5 4
Surat Branch	325	1,800 0 0
North-West Frontier Branch	287	874 3 2
		7,04,379 4 8
Gratuities, including Book's and Medals	148	9,690 12 9
English Lady Doctors under Central Committee	365	47,188 7 1
Travelling Expenses of Lady Doctors in India	367	6,669 8 1
Dufferin Ward, Ripon Hospital, Simla	322	7,500 0 0
		71,048 11 11
<i>United Kingdom Branch—</i>		
Salaries and Travelling Expenses of Lady Doctors in India	302	1,945 2 9
<i>Expenses of Fund—</i>		
Advertisements and Printing	53	10,674 11 5
Telegrams	53	2,514 12 6
Postage and Receipt Stamps	121	4,664 9 7
Salaries and Wages and Travelling Expenses of Office	128	1,04,154 4 3
Office Contingencies and Expenses of Meetings	252	2,022 5 1
Permanent Advances	259	139 5 6
Photographs for Annual Reports	179	2,217 1 2
Commission on realizing Interest, etc	277	4,712 2 2
Office Building	255	1,530 1 1
		1,24,859 11 1
Suspense Account	129	15 1 1
TOTAL		1,24,874 12 2
Cash Balance on 31st December 1913.		2,10,000 0 0
TOTAL		2,10,000 0 0

B. W. NARAYAN, Secy.

Dufferin's Fund.

Investment Account of Central Committee.

	Nominal value.	Cost.
	£ a. p.	£ a. p.
Loan at 6 per cent. per annum to Bengal Court of Wards, Shaktarpur Estate	1,93,000 0 0	1,93,000 0 0
Loan at 6 per cent. per annum to Bhukailash Court of Wards Estate	2,45,000 0 0	2,45,000 0 0
Loan at 6 per cent. per annum to Ghulam Rabbani Court of Wards Estate	54,000 0 0	54,000 0 0
3½ per cent. Government Promissory Notes	1,80,000 0 0	1,72,414 5 7
Loan at 6 per cent. per annum to Kumar Gopika Ramn Roy Estate, Court of Wards	82,058 3 11	82,058 3 11
TOTAL	7,57,058 3 11	7,49,472 9 6

DELI:

M. F. GAUNTLETT,

The 11th May 1914.

Comptroller and Auditor General.

B. W. MARLOW, Colonel,

Honorary Treasurer.

APPENDIX I.

Students studying in the Provincial Medical Colleges and Schools of Medicine in India.

Medical College, School or Hospital Class.	University Course	Assistant Surgeon or Medical Practitioner Class.	Hospital Assistant Class	Midwifery, Nursing or Compounding classes, or attending lectures.
Ahmedabad	9
Allahabad	8
Agra	57	11
Bombay	37	11	...	26
Calcutta	9	7	18	103
Madras	9	32	...	64
Lahore	3	...	9
Patna	2	1
Burma	36
Hyderabad (Sind)	2
Lucknow	10
Baroda	6
Mysore	3
Dacca	4	9
Hyderabad (Deccan)	2	4	5
Cuttack	7	...	3
Benares	1
Patna	20
Nagpur	8
Tonk	2
Bharatpur	2
Surat	3
Trivandrum	6
Quilon	12
Bhopal	21
Karachi	9
Jampur	4
Bangalore	5
Dhaghalpur	2
Rayapuram (Madras)	20	...
Amraoti	6
TOTAL	122	62	105	400

APPENDIX II.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association.

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).

Assam.

DIBRUGARH	} Lady Doctor's } JOHAT } quarters. GOLAGHAT } GAUHATI } Women's Ward	R 3,000 1,000 300 3,590	} Local Boards. Government, Local Board and Municipality. Local Board. Local Board. King Edward Memorial Fund.
GAUHATI		900	
GOALPARA		1,500	
SYLHET		1,500	
SYLHET	} King Edward Memorial Women's Ward	3,000	By the Rani of Bijni.
TOTAL		14,790	

Baluchistan.

QUETTA	} Lady Sandeman Zenana Dispensary. SIDI } MacIver Hospital and quarters.	R 9,620 1,465	By Municipa- lity and Fund. Provincial Revenues and Dispensary Fund.	Presented by R. S. Sant Singh, Contractor.
ZIARAT		5,612		
FORT SANDEMAN.	} Women's Dispensary and quarters. Zenana Hospital	7,198	Partly by Bazar Fund.	Public Works Depart- ment. Partly value of building presented by Mauladad Khan Nasir in 1910, and partly erected at the expense of Fort Sande- man Bazar Fund.
TOTAL		24,195		

Bihar and Orissa.

BHAGALPUR.	Victoria Memorial	R 25,000	.. ..	Raised by subscription from the public of Bha- galpur as a Memorial to the late Queen.
	Rani Shibatarini Zenana Hospital including the Dais' and Com- pounders' quarters.	17,228	.....	The Hospital was presen- ted by Raja Shib Chan- dra Banerjee and the Dais' and Compounders' quarters by the Bona- illi Raj.
GAYA	Lady Elgin Zenana Hospital and out- patient Dispensary and 4 Cottage wards.	64,813	Yes.	

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

		Approximate value of same.	HOW OBTAINED	
			Built by Fund	Presented and by whom (or otherwise)
Bihar and Orissa— <i>concl'd.</i>				
GAYA .	Lady Doctor's residence	10,000	...	Presented by Raja Ram- eswar Prasad Narayan Singh of Maksudpur.
MONGHYR .	Lady Mackenzie Zenana Hospital.	7,800	....	Presented by Raja Chama- lowari Prasad Singh.
	TOTAL .	1,24,901		

Bengal.

		Rs		
CALCUTTA .	Lady Dufferin Victo- ria Hospital.	6,84,369	Built by Provincial Branch with funds col- lected in Bengal.	
	The Surnamoyee Hos- tel.	50,000		Presented by Maha- ran Surnamoyee as boarding house for fe- male students
	Lady Elliott Hostel .	25,000	By special sub- scription	
DACCA . .	Lady Dufferin Women's Hospital	18,769	Dufferin Mo-	
B E R H A M- P O R E .	Victoria Zenana Hos- pital			
CHITTAGONG	Women's Ward (accommodation of 12 beds for in- patients)	...	tal Fund.	
	One building with one bed.	3,339	...	Presented by the Hon'ble Mr Upendra Lal Rai, Zamindar and Merchant, Chittagong
	Lady Doctor's quarters	1,500	General Hos-	
BIRBHUM .	Midwife's quarters .			
	Lady Carson Zenana Hospital	...		resented
	Mrs Carstairs' Cottage	...		cost of landlord
BOGHA . .	Taherunnessa Zenana Hospital.	8,500	Mrs Carstairs Rs50 Nawab Abdus Sobhan Chou- dury of Bogra	gave the land free of rent.
MYMENSING	Bidyamoyee Women's Hospital.	8,000		Built by late Bidyamoyee Dassi Chandharani of Multagacha.
TIPPERAH .	Fahennnessa Zenana Hospital, Comilla	10,000	..	Presented by Nawab Sachin Fahunnessa, Chaudharani of Pee- chinnagaon, Laksam, Tipperah.
	Lady Doctor's quarters.	3,500	Rs1,500 from Fund and Rs2,000 contri- bution.	
	TOTAL .	8,41,201		

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*could*.

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).		Approximate value of same.	HOW OBTAINED.	
			Built by Fund.	Presented and by whom (or otherwise).
Berar.				
		Rs.		
AMRAOTI	Women's Hospital	31,084	By funds locally collected. By the Donor through the Local Fund Supervisor, Buldana.	Mr. Sai Bai Moto.
SHEGAON	Sai Bai Moto Women's Hospital.	11,436		
	TOTAL	45,520		
Burma.				
		Rs.		
RANGOON	Dufferin Maternity Hospital.	1,19,538	Voluntary contributions and donations, grants from Local Government, Central Committee, and Rangoon and other Municipalities in Burma.	Site given by the Government of India.
	Quarters for Nurses	31,969		
	New Nurse's quarters (for Results System-Midwives).	8,403		
	TOTAL	1,59,909		
Bombay.				
		Rs.		
AHMEDABAD	Victoria Jubilee Dispensary for women and children, Jethibai Obstetric and Wand Ramabai Obstetric Wards.	1,39,638	.....	The late Rao Bahadur Ranchodlal Chotalal, C. I. E.; his son, the late Mr. Madhanlal and Sirdar Sir Chimbhai Madhanlal, C.I.E., Bart.
HYDERABAD (SIND).	Women's Hospital including Dais' quarters, dead-house, out-houses, operating room and compound wall.	20,435	Yes.	The piece of ground on which the Hospital is built was presented over to the Countess of Dufferin's Fund Association here by the Hyderabad Municipality.
KARACHI	Lady Dufferin Hospital, Karachi.	1,00,000	.....	Presented by Mr. Edulji Dinshaw, C.I.E.
	Seth Esandas Asanmal Dispensary built in the compound of the L. D. Hospital.	20,000	.....	Presented by Seth Esandas Asanmal.
	Quarters for Nurses	10,000	.....	Voluntary Contribution, of which Rs.5,000 was presented by Dr. K. N. Spencer.
	Karachi City Branch, Female Section, Jaffer Fuddo Dispensary.	10,000	.....	Built by Sheth Jaffer Fuddo and the Municipality.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

		Approximate value of same	How obtained	
			Built by Fund	Presented and by whom (or otherwise).
Bombay—concl'd.				
R				
SURAT.	Sheth Morarblai Vijbhakandas Hospital for Women and Children.	Value of building 22,913 Value of land 22,144	By a grant of Rs1,386 by the Local Branch of Committee of Duffin Fund, Surat	A portion of it legacy by Sheth Morarblai Vijbhakandas 11,000 By a gift from Bai Dayakore 37,671 By a gift from Surat Municipality 3,000
SHOLAPUR.	The Lady Duffin Hospital.	Not known	.	Lent for use only free of rent by the Municipality. Additions and alterations have been done at the expense of the Fund to make the building suitable for hospital purposes. Cost of additions, Rs2,101
	The Raja Bahadur Narasingji's Operation Theatre.	About 3,000	Yes	Built on Municipal ground just close to the Hospital with the donation of Rs5,000 by Raja Bahadur Narasingji.
	Quarters for the Lady Doctor with three out-houses for servants.	3,600	Yes.	Built on Government land granted at a nominal rent of Rs5 per annum, vide G. O. No. (Revenue) 3856 of 9th April 1911.
	House No. 8,000/5, near Sadar Bazar Camp.	1,500	.. ..	Presented by Messrs. Carstji & Sons and A. M. Dalal
SPINARPUR.	Victoria Jubilee Lady Duffin Hospital.	25,000	.....	Government.
	Bungalow for the residence of the Lady Doctor	9,972	Yes.	
TOTAL		4,07,203		

THE COUNTESS OF DUFFERIN'S FUND.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).

Central Provinces.

NAORUR	Dufferin Hospital for Women.	Rs 50,041	Built with Rs14,523 from Provincial Branch, Rs5,000 from Central Committee, and Rs6,852 from subscriptions.	Subscriptions of Rs13,000 were received from Sir Kastur Chand, K.C.I.E., Rs1,500 from the Nagpur Municipality, Rs2,000 from the late Rao Bahadur Appaji Buti towards Hospital Building Fund, and Rs4,300 from Government.
	Zemana Ward	4,000	Built by Fund.	Subscription of Rs2,500 from the late Seth Buchraj of Wardha and Rs500 from Manager, Empress Mills.
JUDDULPORE	Quarters for the Resident Medical Officer and Matron.	2,000	Built by Fund.	
	Lady Elgin Hospital including the new Hospital Assistant's quarters.	20,000	.....	The late Raja Gokul Dass.
	TOTAL	83,704		

Madras.

MADRAS	Victoria Hospital for Caste and Gosha Women.	Rs 1,00,000	.....	Presented by the Rajah of Venkatagiri, K.C.I.E.
MANGALORE.	Women and Children's Hospital.	6,500	.....	Belongs to the Municipality.
CUDDALORE.	Dispensary for Women and Children.	10,000	.....	Built by Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.
MATTANCHERRY (COCHIN).	Women and Children's Hospital.	20,000	.....	} Built by the Cochin Government.
TRICHUR	Civil Hospital	4,000	.....
NELLORE	Jubilee Hospital	22,000	Built by public subscriptions.	Presented by the Jubilee Committee.
VIZAGAPATAM	Victoria Hospital for Women and Children.	10,000	.....	Presented by Sri Maharaja Gajapathi Rao, C.I.E.
BOBBILI	Rajah of Bobbili's Hospital for Women.	5,000	.....	Presented by the late Hon'ble the Rajah of Bobbili, K.C.I.E.
SALEM	Queen Alexandra Hospital for Women and Children.	22,000	.....	Public subscriptions and Government Grant.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

		Approximate value of same.	HOW OBTAINED.	
			Built by Fund.	Presented and by whom (or otherwise).
Madras—concl'd.				
		R		
VIZIANAGRAM	H. H. the Maharaja Kumari-ka of Rewa's Caste and Gosha Hos-pital.	50,000	H. H. the Maha- raja Kumari- ka of Rewa	Presented by Maharaja Kumari-ka of Rewa.
BELLARY	Victoria Memorial Wo-men's Hospital	10,000	V. M. Fund, raised by pub- lic subscrip- tion	
TINNEVELLY	Dufferin Women's Dis-pensary, Vannarpet.	25,000	District Board of Tinnevely.	Rs.10,000 contributed by Rajah Sir S. Rama- swamy Mudaliar, Kr., C.I.E.
ADONI	V. M. Women's Dis-pensary.	14,000	V. M. Fund, raised by pub- lic subscrip- tions.	
CONJEEVE- HAM.	Women and Children's Dispensary.	12,800	" "	Rajah Sir S. Ramaswamy Mudaliar, Kr., C.I.E.
CALICUT	Women and Children's Hospital.	34,079	.....	Partly by subscription, chief donor being Sir S. Ramaswamy Mudaliar, Kr, C.I.E., and partly by the Municipality and District Board
PUDUKOTTAI	Maharaja's Dispensary for Women and Child- ren.	5,000	.....	State buildings. Pre- sented by H. H. the Maharaja of Pudu- kottai.
COIMBATORE	Women's Hospital	1,000	Purchased by the Municipa- lity.	
COCANADA	Lady Havelock Hospital	45,000	By District Board, Goda- veri.	Rs.5,000 contributed by Mr. Venkatarathnam Rao Bahadur.
DINDIGUL	Women and Children's Hospital.	13,668	Municipality.	
TRIVANDRUM	Female side, General Hospital	46,374	.....
Do.	Maternity and Women and Children's Hos- pital.	47,277	.....
QUILON	Victoria Jubilee Hos- pital.	10,753	.....
ALLEPPEY	Female side, District Hospital.	3,590	.....
TOTAL		5,18,041		

THE COUNTESS OF DUFFERIN'S FUND.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).
MYSORE			
• Her Highness the Maharani's Hospital.	₹ 22,622	.....
BANGALORE.			
• Maternity Hospital	33,034	.....	By Mysore Government
KOLAR	5,500	Under construction at a cost of ₹5,500. about	and by contribution.
• Ditto	5,500	Ditto.	Ditto.
CHIKMAGALUR.			
• Ditto	4,060	.....
HASSAN			
• Women's Dispensary attached to General Hospital.	1,500	.....
MYSORE			
• Women's Dispensary attached to City Hospital.	1,500	.....
BANGALORE			
• Women's Hospital and Dispensary.	6,000	.....
SHIMOGA			
• Ditto	5,248	Under construction.	
TUMKUR		.....
• Ditto	...	.....
CHITALDROOG.			
BANGALORE			
• Lady Curzon Hospital for Women and Children.	1,10,000	.....	By Government of India and certain Indian gentlemen in the cantonment.
TOTAL	1,94,964		

DERA ISMAIL KHAN.

Women's Hospital

TOTAL

N.-W. F. Province.

₹ 40,000

40,000

Subscriptions, District Fund and Municipality.

LAHORE

• Lady Aitchison Hospital for Women.

Punjab.

₹ 80,000

AMRITSAR

• Women's Hospital

15,000

JHANG.

• Women's Ward, Civil Hospital.

6,000

LUDHIANA.

• Women's Ward, Civil Hospital.

10,000

RAWALPINDI

• Women's Dispensary and quarters.

14,834

LYALLPUR.

• Women's Hospital

4,246

TOTAL

1,30,086

Assisted by the Punjab Branch, Countess of Dufferin, with a substantial monthly grant. Municipality. District Board and Municipality.

Municipality.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).		Approximate value of same.	HOW OBTAINED.	
			Built by Fund	Presented and by whom (or otherwise).
United Provinces of Agra and Oudh.				
AGRA . . .	Lady Lyall Hospital	1,27,003	Yes.	Ferozabad Municipality.
	Maternity Hospital	35,700	Yes.	
	Nurses' Quarters	29,095	Yes	
	Lady Doctor's Quarters	35,239	Yes	
	Hostel for Female Students	18,000	Yes	
	Ferozabad Women's Dispensary	1,051	..	
	Pipalmundi Women's Dispensary	}	..	
	Taiganj Women's Dispensary		..	
	Dufferin Hospital with quarters, out houses, etc.		51,486		Yes
	ALIGARH . .				Rupces 36,704 contributed by Rani Khushal Kuar Saluba of Barauli, District Aligarh.
ALLAHABAD .	Dufferin Hospital	71,543	{ All paid by Provincial Government
BANRAICH . .	Lady Doctor's Quarters	19,000	..	
BARA BANKI .	Dufferin Hospital	32,379	Yes.	Presented by Poor House Committee and District Board.
	Grigg Women's Hospital	3,000	..	
	Lady Doctor's Quarters	3,000	..	
	Maula Raiganj Ward	1,900	.	
	Operating Room	1,345	Yes	
BARRILLY . .	Pardabnashun Ward and Chankulur's Quarters	4,163	..	Built from funds provided by Government
	Dufferin Hospital	50,354	Yes	
BENARES . . .	Ishwari Memorial Hospital.	1,56,374	..	Built from subscriptions and Government grants.
BIJNOR . . .	{ Women's Hospital	13,397	Yes.	Rupces 1,872 were contributed by District Board.
		5,044	Yes.	
		11,152	Yes.	
NAGINA . . .	{ Women's Hospital with quarters attached			A contribution being made by the Municipality.
CAWNPORE . .	Dufferin Hospital	41,356	Yes.	Subscriptions also especially collected for the purpose Presented by the Hon'ble Lala Bishambar Nath. By Victoria Memorial Fund.
	Maternity Ward	7,584	Yes.	
	Nurses' Quarters	4,410	....
	Dass' Quarters	1,077	.. ..
	Female Sub-Assistant Surgeon's Quarters	1,564	Yes.	
	Female Compounder's Quarters	1,578	....
	Two Servants' Quarters	1,044	Yes.	

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).		Approximate value of same.	HOW OBTAINED.	
			Built by Fund.	Presented and by whom (or otherwise).
United Provinces of Agra and Oudh—contd.				
FARRUKHABAD	Dufferin Hospital	22,499	Yes.	The Compounders' Quarters were formerly part of the Sadr Dispensary, but were made over to the Fund on the establishment of a branch at Farrukhabad.
FYZADAD GHAZIPUR	Operation Room and equipment for same.	3,000	.....	Donation by Babu Bharat Indu.
	Dufferin Hospital	5,000	Yes.	Built from Municipal contribution and local subscriptions.
	Women's Hospital	11,960	.....
GONDA	Dufferin Hospital	3,751	Yes.	Presented by Mrs. Pannel of Isle of Wight.
	May Barrow Hospital	3,540	.....
		Quarters for female Compounder, Kaharin and sweepers.	1,031	.....	By grant-in-aid from Government.
GORAKHPUR	Zenana Hospital	27,965	.....	By Government.
KHERI	Dufferin Hospital	19,546	Hospital building built by fund for 13,546.	Six wards presented by private persons.
LUCKNOW	Dufferin Hospital,	64,468	Yes.	Presented by Quinton Memorial Fund Committee.
	Quinton Memorial Wing	15,162	.....
MERUT.	Dufferin Hospital, with quarters for Lady Doctor, Compounder and servant.	75,590	.....	Built from Government and District Board grants and subscriptions.
MIRZAPUR	Jubilee Hospital	15,826	.....	Jubilee Hospital Fund, Mirzapur.
	Eye Ward, Sub-Assistant Surgeon's and Compounder's quarters.	9,594	Yes.	Chiefly from a contribution made by the Provincial Branch.
PARTABGARH	Dufferin Hospital	25,269	.....	Presented by Rani Raghuraj Koer of Partabgarh.
	Enclosure wall to above	5,712	.....	Built from a Government grant.
PILIBHIT RAE BARELI		14,225	Yes.	A contribution was also made by the late Rana Sir Shanker Baksh Singh, K.C.I.E., of Khajurgaon.
		8,962	Yes.	
SAHARANPUR	Dufferin Hospitals	31,605	Yes.	A part of the building valued at Rs. 3,500 was presented by Government which also gave a grant of Rs. 1,595.
SHARJAHAN-PUR.		14,588	.....	Built from Provincial Committee, Municipal and District Board contributions and local subscriptions.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same	HOW OBTAINED.	
		Built by Fund	Presented and by whom (or otherwise)

United Provinces of Agra and Oudh—*concl'd.*

R

HATHRAS	Singhani Women's Hospital.	10,000	Yes	Presented by Lala Parmasand
SITAPUR	Dufferin Hospital	48,344	...	Built from subscriptions
TOTAL		11,63,345		

Native States.

R

BETTIAB	Dufferin Hospitals . }	84,884	....	Bettiah Raj.
DARBHANGA		33,600	....	Darbhanga Raj
SANGRUR, JHIND.	Victoria Women's Hospital	25,000	...	Jhind Durbar
BHOPAL	Landowne Hospital and Lady Minto Training School and Hostel for Girls.	60,392	..	By the past and present Begums of Bhopal
KAPURTHALA	Victoria Jubilee Hospital for Women	9,588	... ..	By H. H. the Rajah of Kapurthala
KOTAH	Victoria Jubilee Hospital and Women's Dispensary.	65,440	....	By H. H. the Maharaja of Kotah.
UDAIPUR	Walter Zenana Hospital	27,003	...	By H. H. the Maharaja of Udaipur.
ALWAR	Lady Dufferin Hospital	27,000	....	} By H. H. the Maharaja of Alwar
	Lady Elgin Wards for Pordahnashins.	11,191	...	
GWALIOR	Jaya-Arogya Hospital for Women and Children at Lashkar	2,56,000	....	} By the State
SRINAGAR	Diamond Jubilee Zenana Hospital.	41,671	....
REWARI	Zenana Hospital and Quarters for Hospital Staff	4,500	...	

THE COUNTESS OF DUFFERIN'S FUND.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).

Native States—*contd.*

		R		
PATIALA	Lady Dufferin Hospital	50,000	.....
	Hendley Women's Dispensary.	5,241	.....	His Highness the late Maharaja.
	Lady Curzon School for the training of nurses, etc.	24,280	.....	} The late Council of Regency.
JHANG	Civil Hospital, Women's Ward.	6,000	.....
RAMPUR	Zenana Hospital and Dispensary.	17,000	.....	District Board and Municipality.
TONK	Walter Women's Hospital.	19,500	.....	By the State.
BAHAWALPUR	Jubilee Women's Hospital.	50,000	.....	By H. H. the Nawab of Tonk.
BIKANIR	Women's Wards of the Bhagwan Das Hospital.	8,985	.....	By H. H. the Nawab of Bahawalpur.
JODHPUR	Jaswant Hospital for Women.	50,000	.....	By Rai Bahadur Seth Bhagwan Das Bagla of Churu.
BHARATPUR	Maji Sahiba Darya Kunar's Women's Dispensary.	37,524	.....	By H. H. the Maharaja of Jodhpur.
RAJKOT	Rasulkanji Hospital for Women and Children.	80,000	.....	By the Bharatpur Durbar.
TRIVANDRUM	Women's Ward and out-patient dispensary, General Hospital.	24,000	.....	By H. H. the Nawab Sahab of Junagadh.
	Nursing Sister's quarters, General and Women and Children's Hospital.	22,374	.....
	Combined Maternity and Women and Children's Hospital.	47,277	.....
	Victoria Jubilee Hospital, Quilon.	10,753	.....
	Women's Ward, Alleppy Hospital.	3,590	.....

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*concl'd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund	Presented and by whom (or otherwise)
Native States— <i>concl'd.</i>			
	<i>R</i>		
JAOHA . Victoria Zenana Hos- pital.	20,000	..	By the State.
BEAWAR . Women's Wards, Cha- ritable Dispensary.	3,700	..	District Board and Mun- cipality.
BARODA . Victoria Jubilee Wards	28,527	.....	} H. H. the Gaekwar's Government
Jamnabai Dispensary	1,56,922	....
NAHAN . Shamsher Zenana Hos- pital	13,643	.	By the late H. H. Sir Sardendra Bikram Pra- kash, K C S I., Ruler of Sirmoor
HYDERABAD (Deccan). Victoria Women's Hos- pital, Hyderabad	3,70,504	.....	By the State.
Rani Cheelam Janki Bai Zenana Hospital, Gul- burga.	9,135	.....	Rs. 600 from the Rani Janki Bai of Sarnapatti; balance by the State.
Zenana Ward, Raichur	7,000	....	By Local Fund.
TOTAL .	17,11,634	-	

Abstract.

	R
Native States	17,11,634
United Provinces of Agra and Oudh	11,83,345
Bengal	8,41,201
Madras	5,18,041
Bombay	4,07,202
Mysore	1,91,961
Burma	1,50,909
Punjab	1,20,080
Bihar and Orissa	1,21,901
Central Provinces	83,704
Berar	45,520
N.-W. F. Province	40,000
Baluchistan	24,195
Assam	14,790
Total value of buildings	54,79,486

APPENDIX III.

Return of Patients treated in Hospitals for Women in India.

The following returns of patients treated are divided into three classes, viz. :—

Class A.—Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund.

„ B.—In Female Hospitals assisted by the Dufferin Fund.

„ C.—Native States (which now include the statistics returned by the Mysore Branch).

Assam.

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			TOTAL.	REMARKS.
		In.	Out.			
			Treated in hospital.	Treated at home.		
Silchar . . .	Charitable Dispensaries	87	10,762	98	10,947	
Sylhet . . .		113	6,228	168	6,509	
Sanamganj . . .		19	2,803	115	2,532	
Karimganj . . .		...	3	120	122	
Dhubri . . .		10	609	29	648	
Goalpara . . .		9	1,055	20	1,084	
Gauhati . . .		80	3,090	84	3,254	
Darpota . . .		...	...	8	8	
Tezpur . . .		63	2,600	43	2,706	
Mangaldai . . .		...	...	5	5	
Nowgong . . .		...	1,540	26	1,566	
Sibsagar . . .		1	...	26	27	
Jorhat . . .		68	6,655	126	6,849	
Tea . . .		2	...	52	54	
Aljal . . .		...	29	...	29	
Shillong . . .		...	...	1	1	
TOTAL		452	31,968	921	36,841	

Baluchistan.

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			TOTAL.	REMARKS.
		In.	Out.			
			Treated in hospital	Treated at home		
Quetta . .	Dufferin Zenana Hospital	30	5,073	65	5,227	
Sibi . . .	Meivror Women's Dispensary.	50	3,736	52	3,838	
Fort Sandeman .	Lady Dufferin Zenana Hospital.	51	5,166	42	5,279	
Quetta . .	Patel Ward in the Civil Hospital.	253	...	...	253	
	TOTAL .	484	13,994	159	14,597	

Bengal.

Return of Patients treated in Women's Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			TOTAL.	REMARKS.
		In.	Out.			
			Treated in hospital.	Treated at home.		
Calcutta .	Lady Dufferin Victoria Hospital.	1,591	7,823	7	9,421	
Dacca .	Lady Dufferin Female Hospital.	65	3,548	160	5,773	
	TOTAL .	1,656	12,371	167	15,194	

Bengal—*contd.*

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			TOTAL.	REMARKS.
		In.	Out.			
			Treated in hospital.	Treated at home.		
Birbhum . . .	Lady Curzon Zenana Hospital.	45	4,018	54	4,117	
Cossipore (24-Par-gamahs).	Kaminimoyee Dasi's Women's Ward attached to the North Suburban Hospital.	191	3,907	76	4,174	
Bankura . . .	Lady Dufferin Zenana Hospital.	60	4,089	43	4,192	
Berhampore (Mursidabad).	Victoria Zenana Hospital	599	13,410	341	14,250	
Khulna . . .	Women's Ward attached to the Khulna Woodburn Hospital.	123	4,700	38	4,861	
Nadia . . .	Rani Tara Sundari Women's Ward attached to the Navadwip Garrett Hospital.	14	306	176	496	
	Women's Ward attached to the Meherpur Hospital.	...	...	19	19	
	Women's Ward attached to the Perojpur Dispensary.	...	...	15	15	
Bakarganj . . .	Women's Ward attached to the Bhola Dispensary.	...	20	29	49	
	Women's Ward attached to the Patuakhali Dispensary.	...	...	...	...	Report not furnished.
	Women's Ward attached to the Barisal Hospital.	...	...	...	...
	Women's Ward attached to the General Hospital.	235	10,634	123	10,992	
Chittagong . . .	Cox's Bazar Dispensary .	8	2,206	64	2,278	
Carried over .		1,275	43,290	878	45,443	

Bengal—contd.

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B—contd.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.				REMARKS.
		In.	Out.		TOTAL.	
			Treated in hospital.	Treated at home.		
	Brought forward	1,275	43,290	878	45,443	
Faridpur	Women's Ward attached to the Charitable Dispensary.	..	..	..	..	Report not furnished.
	Women's Ward attached to the Madaripur Dispensary.	..	..	..	..
Mymensingh	Bidyamoyee Women's Hospital.	196	4,360	387	4,943	
	Radha Kishore Manikya Women's Hospital.	76	12,936	108	13,140	
Noakhali	Women's Ward attached to the Feni Dispensary.	4	24	24	52	
	Women's Ward attached to the Hurriehpur Dispensary.	..	16	..	16	
Pabna	Hemangini Devi Women's Hospital attached to the Pabna Women's Hospital.	74	1,441	230	1,745	
Rangpur	Kundi Dispensary	..	71	10	81	
	Ulipore Dispensary	..	..	16	16	
	Kakina Dispensary	..	..	..	..	The post remained vacant
Tipperah	Fataunnissa Zenana Hospital.	14	6,659	133	6,811	
	Total	1,639	68,817	1,791	72,247	

THE COUNTESS OF DUFFERIN'S FUND.

Berar.

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B.

Women's Hospitals assisted by the Dufferin Fund.						
CLASS B.						
STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.				
		In.	Out.		TOTAL.	
			Treated in hospital.	Treated at homo.		
Amraoti . . .	The Amraoti Women's Hospital.	235	5,829	440	6,504	
Shegaon . . .	The Sai Bai Moti Women's Hospital.	52	5,951	75	6,078	
Akola . . .	Women's Hospital . . .	...	1,776	49	1,825
Ellichpur City . . .	Women's Ward, Dispensary.	2	...	37	39	
Chandur Bazar . . .	Women's Ward, Branch Dispensary.	...	...	40	40
Daryapur . . .		...	...	11	11
Anjangaon . . .		...	...	61	61
Morsi . . .		...	...	29	29
Chaudur Railway . . .	City Dispensary . . .	...	...	47	47
Akola . . .	Dispensary . . .	...	2	35	37
Basoin . . .	Women's Ward of Main Dispensary.	1	...	69	69	
Buldana . . .	Branch Dispensary . . .	...	...	20	21
Khangaon . . .		...	...	62	62
Mehkar . . .	Women's Ward of Main Dispensary.	...	...	20	20
Ycotmal . . .	Women's Ward of Branch Dispensary.	...	...	19	19
Darwha . . .		...	...	27	27
Pusad . . .		...	...	20	20
Digras . . .		...	...	34	34
Jalgaon . . .		...	...	19	19
Deoolgaon Raja . . .		...	...	20	20
Akote . . .		...	...	22	22
Karanja . . .		...	...	65	65
TOTAL . . .		290	13,558	1,221	15,069	

Bihar and Orissa.

Return of Patients treated in Women's Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL	PATIENTS TREATED IN 1913				
		In.	Out.		TOTAL.	REMARKS.
			Treated in hospital	Treated at home.		
Gaya .	Lady Elgin Zenana Hospital	447	5,206	512	6,165	
	TOTAL	447	5,206	512	6,165	

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION	NAME OF HOSPITAL	PATIENTS TREATED IN 1913				
		In.	Out.		TOTAL	REMARKS.
			Treated in hospital	Treated at home		
Bhagalpur .	Rani Shibatarin Victoria Memorial Dufferin Hospital.	345	3,891	163	4,299	
Monghyr .	Charitable Dispensary	183	3,976	69	4,230	
Sambalpur .	Main Dispensary, Women's Department.	80	3,876	303	4,268	
Dooghur .	Charitable Dispensary	80	1,758	78	1,916	
Puri .	Pilgrim Hospital, Women's Ward.	154	1,554	40	1,750	
	TOTAL	733	15,055	653	16,463	

Bombay.

Return of Patients treated in Women's Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Hyderabad (Sind)	Women's Hospital	668	7,968	20	8,676
	TOTAL	668	7,968	20	8,676

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Ahmedabad	Victoria Jubilee	1,771	11,572	13	13,356
Bolgaum	Civil Hospital	284	...	7	291
Dhulia	Municipal Dispensary	...	4,134	12	4,146
Karachi	Lady Dufferin Hospital, including Esandas Asanmul Dispensary.	694	13,736	41	14,471
	Jaffer Faddo Dispensary	...	15,312	...	15,312
Kapadvanj	Women's Dispensary	...	11	33	44
Kaira	Civil Hospital	...	...	115	115
Poona City	K. B. P. S. Charitable Dispensary.	...	27	82	109
Godhra	Panch Mahals and Rewa-kantha Branch.	...	23	328	351
Sholapur	Lady Reay Dufferin Hospital.	230	10,358	48	10,636
	TOTAL	2,979	55,173	679	58,831

Burma.

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			
		In	Out.		TOTAL
			Treated in hospital.	Treated at home	
Rangoon . . .	Lady Dufferin Maternity Hospital.	791	13,199	...	13,990
	TOTAL . . .	791	13,199	..	13,990

Central Provinces.

Return of Patients treated in Women's Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			
		In	Out.		TOTAL.
			Treated in hospital	Treated at home	
Nagpur . . .	Dufferin Hospital . . .	621	9,968	121	10,710
Jubbulpore . . .	Elgin Hospital . . .	238	5,453	250	5,947
	TOTAL . . .	859	15,427	371	16,657

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			
		In.	Out.		TOTAL
			Treated in hospital.	Treated at home.	
Saugor . . .	Main Dispensary . . .	101	1,716	42	1,859
	TOTAL . . .	101	1,716	42	1,859

Madras.

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Madras	Victoria Hospital for Caste and Gosha Women.	2,526	16,055	...	18,581
	TOTAL	2,526	16,055	...	18,581

North-West Frontier Province.

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Malakand	Lady Minto Swat Hospital	171	3,339	3	3,513
Dera Ismail Khan	Zenana Municipal Hospital	172	2,379	...	2,551
	TOTAL	343	5,718	3	6,064

Punjab.

Return of Patients treated in Women's Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Gujrat	Women's Out-door Department of Civil Hospital.	...	14,378	45	14,323
Lahore	Lady Aitchison Hospital	727	3,526	...	6,253
Simla	Dufferin Ward, Ripon Hospital.	149	4,058	20	4,227
	TOTAL	876	23,863	65	24,803

United Provinces of Agra and Oudh.

Return of Patients treated in Women's Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Agra . . .	Lady Lyall Hospital . .	1,418	...	..	1,418
	Maternity Hospital. .	780	...	...	780
	Lady Lyall Dispensary .	...	13,019	...	13,019
Aligarh . .	Dufferin Hospital . .	688	6,291	90	7,069
Ailahabad . .	Ditto . .	670	9,228	293	10,191
Babraich . .	Ditto . .	261	11,652	34	11,947
Bara Banki . .	Grigg Women's Hospital	273	9,156	40	9,469
Bareilly . .	Dufferin Hospital . .	711	11,746	377	12,834
Benares . .	Ishwari Memorial Hos- pital.	858	15,041	...	15,899
Bijnor . .	Mrs. Markham's Women's Hospital.	120	5,674	70	5,864
Bijnor (Nagina)	Women's Hospital . .	61	5,291	34	5,386
Budaun . .	Ditto . .	262	12,750	122	13,134
Cawnpore . .	Dufferin Hospital . .	460	9,749	159	10,368
Farrukhabad . .	Ditto . .	225	5,368	390	6,003
Fyzabad . .	Ditto . .	381	10,081	207	10,669
Gouda . .	Ditto . .	177	7,620	40	7,837
	Mary Barrow Hospital .	11	...	...	/ 11
Ghazipur . .	Women's Hospital . .	552	6,097	62	6,711
Gorakhpur . .	Zenana Hospital . .	498	7,646	157	8,301
Kheri . .	Dufferin Hospital . .	207	3,500	70	3,777
Lucknow . .	Ditto . .	938	9,352	...	10,340
Meerut . .	Ditto . .	427	11,070	...	11,497
Mirzapur . .	Ditto . .	176	5,916	77	6,169
Partabgarh . .	Rani Raghuraj Kuar Dufferin Hospital.	234	4,485	51	4,770
Pilibhit . .	Dufferin Hospital . .	258	5,581	91	5,930
Rae Bareli . .	Ditto . .	184	5,350	178	5,712
Saharapur . .	Ditto . .	188	5,579	70	5,837
Shahjehanpur . .	Ditto . .	336	8,329	245	8,910
Sitapur . .	Ditto . .	322	6,845	29	7,196
Singhari (Hath- ras).	Women's Hospital . .	263	7,063	58	7,384
	TOTAL	11,989	219,499	2,944	234,432

United Provinces of Agra and Oudh—*concl'd.*

Return of Patients treated in Women's Hospitals, assisted by the Dufferin Fund.

CLASS B.

STATION	NAME OF HOSPITAL	PATIENTS TREATED IN 1913.			
		In.	Out.		TOTAL
			Treated in hospital	Treated at home.	
Agra	Pipalmandi Dispensary .	..	6,584	42	6,626
	Talaganj Dispensary .	..	5,518	16	5,534
	Ferozabad Dispensary .	.	5,708	80	5,788
Azamgarh .	Women's Hospital .	221	5,949	30	6,200
Bensies .	Bhelaipura Dispensary .	..	7,181		7,181
Budoun .	Sahaswan Women's Dispensary .	...	2,186	15	2,201
Bulandshahr	Mrs. Leslie Porter's Hospital.	596	3,041	64	3,501
Dohra Dun	Women's Hospitals . {	100	6,855	215	7,170
Etawah		84	2,961	12	3,057
Furrakhabad	Shamshabad Dispensary .	...	2,858	..	2,858
Fatehpur .	Mrs. Rustomji's Dufferin Hospital.	160	3,266	66	3,492
Gonda .	Anson Memorial Hospital	119	8,589	50	8,438
Hardoi .	Women's Dispensaries {	99	4,197	51	4,350
Hardoi (Sandila)		58	5,995	68	6,121
Hamirpur .	Women's Hospital .	105	2,530	26	2,931
Mainpuri .	Women's Dispensary .	208	4,744	225	5,177
Moradabad .	Victoria Hospital .	620	13,590	104	14,314
Moradabad (Amroha).	Women's Dispensary .	73	8,734	40	8,846
Matra .	Women's Hospitals . {	68	4,431	34	4,523
Muzaffarnagar		224	4,776	8	5,008
Naini Tal .	Crosthwaite Hospital .	202	6,276	465	6,943
Orai (Jalau)	Women's Dispensary .	58	3,607	51	3,716
Saltanpur .	Amethli Women's Hospital	100	2,564	29	2,693
TOTAL .		2,894	123,070	1,754	126,718

Native States (which now include the statistics returned by the Mysore Branch).

CLASS C.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.				REMARKS.
		In.	Out.		TOTAL.	
			Treated in hospital.	Treated at home.		
Alwar . .	Lady Dufferin Hospital . .	325	14,435	856	15,616	
Udaipur . .	Walter Zenana Hospital . .	65	1,755	...	1,820	
Kotah . .	Victoria Jubilee Hospital . .	173	8,113	76	8,362	
Bharatpur . .	Maji Saliba Darya Kaur's Women's Hospital.	265	5,216	31	5,506	
Bikanir . .	Main Dispensary, Bhugwandas Hospital.	135	4,814	177	5,126	
Jodhpur . .	Jaswant Hospital . .	96	3,564	450	4,110	
Jaipur . .	Zenana Wards, Mayo Hospital.	719	15,420	120	16,259	
Tonk . .	Walter Women's Hospital . .	221	6,979	348	7,548	
Boisar . .	Women's Hospital . .	52	5,117	128	5,297	
Gwalior . .	Jaya-Arogya Hospital for Women and Children.	1,550	28,481	...	30,031	
	Civil Hospital, Women's Department, Ujjain.	152	4,802	...	4,954	
Rowah . .	Zenana Hospital . .	60	8,456	95	8,611	
Baroda . .	Jamnabai Hospital . .	...	24,435	...	24,435	
	Jubilee Wards . .	246	...	...	246	
Nahan . .	Shamsher Zenana Hospital	56	4,011	75	4,142	
Kapurthala . .	Victoria Jubilee Hospital	363	28,311	...	28,674	
Patiala . .	Lady Dufferin Hospital and City Branch.	499	13,065	...	13,564	
Jhind (Sangrur)	Victoria Female Hospital . .	56	7,094	82	7,232	
Bahawalpur . .	Jubilee Women's Hospital	379	12,131	805	13,315	
Bhopal . .	Lady Lansdowne Zenana Hospital.	302	4,632	2,315	7,249	
	Victoria Women's Hospital	1,899	12,686	...	14,585	
Hyderabad . .	Chaderghat Dispensary . .	4	4,867	...	4,871	
	Hanamkonda Dispensary . .	12	4,092	30	4,134	
	Aurangabad Dispensary . .	52	3,963	...	4,015	
	Rancee Cheolam Janukabai . .	45	2,766	65	2,876	
	Jalna Dispensary . .	14	1,733	...	1,747	
	Dudbaoli Dispensary . .	...	3,207	...	3,207	
	Carried over . .	7,740	234,139	5,653	247,532	

Native States (which now include the statistics returned by the Mysore Branch)—*conold*CLASS C—*conold*.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1913.				REMARKS.
		In.	Out.		TOTAL	
			Treated in hospital.	Treated at home		
	Brought forward	7,740	234,130	5,653	247,523	
Tiruvandrum	Combined Maternity and Women and Children's Hospital	2,224	10,989	—	13,213	Travancore State.
Tiruvandrum	Female side, General Hospital.	953	9,504	84	10,541	
Quilon	Victoria Jubilee Hospital	771	13,417	100	14,288	
Alleppey	Female side, District Hospital.	208	19,930	42	11,180	Cochin State.
Mattanchery	Women and Children's Hospital	1,250	19,116	500	21,166	
Ernakulam	General Hospital, Female side.	—	18,501	80	18,581	
Trichur	Trichur Hospital, Female side	446	8,749	—	9,195	
Rajkot	Rasulkhanp Hospital for Women and Children.	245	1,913	—	2,158	
Jaora	Victoria Zenana Hospital	60	7,501	—	7,561	
Srinagar	Diamond Jubilee Zenana Hospital.	702	8,355	400	9,657	
Dettiah	Dufferin Hospital	1,215	21,043	5	22,263	
Darbhanga		601	38,382	91	39,077	
Rampur	Zenana Hospital	266	3,881	200	4,347	
Bogra		—	5,087	179	5,266	
	Victoria Hospital, Women's Department.	945	35,543	—	36,488	
Dangalore	Maternity Hospital	749	14,739	22	15,510	
	Lady Curzon Hospital	1,751	12,448	4,150	18,349	
	General Hospital, Women's Department	—	25,401	—	25,401	
Mysore	H. H. The Maharani's Hospital.	572	11,463	90	12,121	
Kolar	Gold Fields Women's Dispensary.	180	9,266	30	9,476	
	Women's Dispensary	—	13,730	30	13,760	
		10	7,491	39	7,541	
		33	11,053	—	11,086	
		13	16,431	16	16,463	
		—	10,206	285	10,551	
		—	8,190	52	8,242	
		61	9,956	141	10,158	
Chitaldreg		—	6,950	200	7,150	
	Total	21,015	634,734	12,730	653,484	

APPENDIX IV.
Total number of women and children treated in *all* hospitals and dispensaries in India during 1912, extracted from the Annual Reports and Returns of the Provinces.

Total number of women and children treated in <i>and</i> <i>and</i> from the Annual Reports and Returns of the Provinces.										
	IN-DOOR PATIENTS.				OUT-DOOR PATIENTS.				Grand total in and out-door patients.	Percentage of women and children treated compared with men.
	Women.	CHILDREN.		Total in-door patients.	Women.	CHILDREN.		Total out-door patients.		
		Male.	Female.			Male.	Female.			
United Provinces.										
Provincial Total Class A (General Hospitals and Dispensaries).	7,878	2,388	615	10,881	622,008	589,867	860,380	1,572,255	1,583,136	
Provincial Total Class B (Women's Hospitals and Dispensaries).	13,705	1,060	1,279	10,133	241,865	68,434	74,304	384,103	400,230	87
Combined Provincial Total	21,673	3,447	1,894	27,014	863,873	658,301	434,684	1,956,358	1,983,372	
Bombay (including Aden and Persian Gulf.)										
Provincial Total Class A (General Hospitals and Dispensaries).	8,850	1,718	637	11,405	434,886	422,804	807,705	1,164,805	1,176,800	
Provincial Total Class B (Women's Hospitals and Dispensaries).	5,072	473	411	6,856	42,100	14,111	14,740	70,951	77,807	
Combined Provincial Total	14,822	2,191	1,248	18,261	476,986	436,915	822,445	1,235,846	1,254,107	120

Barma.									
Provincial Total Class A (General Hospitals and Dispensaries).	7,206	1,031	722	6,074	222,897	188,014	145,730	855,307	694,467
Provincial Total Class B (Women's Hospitals and Dispensaries).	678			678	22,443	7,026	8,345	59,623	59,601
Combined Provincial Total	7,974	1,031	722	6,752	245,340	195,040	154,075	914,930	754,068
Assam.									
Provincial Total Class A (General Hospitals and Dispensaries).	1,474	307	235	2,019	201,130	203,593	145,652	610,675	612,694
Provincial Total Class B (Women's Hospitals and Dispensaries).									
Combined Provincial Total	1,474	307	235	2,019	201,130	203,593	145,652	610,675	612,694
Bengal.									
Provincial Total, including Calcutta Medical Institutions, Class A (General Hospitals and Dispensaries).	13,787	2,133	1,628	17,443	601,045	640,655	319,319	1,420,623	1,435,070
Provincial Total, Class B (Women's Hospitals and Dispensaries).	1,822	119	206	2,277	26,605	6,409	8,907	40,840	42,217
Combined Provincial Total	15,609	2,252	1,834	19,720	627,650	647,064	328,226	1,461,463	1,477,287
Carried over	61,532	9,258	8,927	70,707	2,402,239	2,090,372	1,331,067	6,682,997	6,066,434

APPENDIX IV—*concl'd.*

total number of women and children treated in *all* hospitals and dispensaries in India during 1912, extracted from the Annual Reports and Returns of the Provinces—*concl'd.*

from the Annual Reports and Returns of the										
	IN-DOOR PATIENTS.				OUT-DOOR PATIENTS.				Grand total in and out-door patients.	Percentage of women and children treated compared with men.
	Women.	CHILDREN.		Total in-door patients.	Women.	CHILDREN.		Total out-door patients.		
		Male.	Female.			Male.	Female.			
Brought forward	61,552	9,288	5,927	76,767	2,405,238	2,009,372	1,384,057	5,889,067	5,905,434	...
Bihar and Orissa.										
Provincial Total Class A (General Hospitals and Dispensaries).	6,244	1,303	549	8,006	350,548	367,144	227,401	935,003	943,189	
Provincial Total Class B (Women's Hospitals and Dispensaries).	377	20	27	424	5,502	745	2,446	8,693	9,117	
Combined Provincial Total	6,621	1,323	576	8,520	356,050	367,889	229,847	943,786	952,306	78
Madras.										
Provincial Total Class A (General Hospitals and Dispensaries).	18,055	2,331	1,009	22,085	1,200,266	873,382	664,572	2,747,220	2,769,905	
Provincial Total Class B (Women's Hospitals and Dispensaries).	10,893	322	374	11,694	145,880	55,948	63,270	205,098	276,792	
Combined Provincial Total	29,033	2,653	2,043	34,370	1,355,146	929,330	727,842	3,012,318	3,046,697	100

—concl'd.

Central Provinces and Berar.

Provincial Total Class A (General Hospitals and Dispensaries).	2,060	514	238	2,532	261,206	322,126	253,129	608,771	860,003
Provincial Total Class B (Women's Hospitals and Dispensaries).	900	91	120	1,147	9,901	4,252	5,601	10,964	21,131
Combined Provincial Total	2,960	605	358	3,679	271,407	326,378	258,690	629,735	881,134

Punjab.

Provincial Total Class A (General Hospitals and Dispensaries).	18,573	4,479	1,642	24,094	820,663	723,622	837,251	2,071,536	2,090,200
Provincial Total Class B (Women's Hospitals and Dispensaries).	8,002	700	650	9,792	126,604	60,334	63,429	240,657	260,463
Combined Provincial Total	26,565	5,179	2,292	34,475	946,447	774,156	874,660	2,312,193	2,350,663

North-West Frontier Province.

Provincial Total Class A (General Hospitals and Dispensaries).	1,816	312	274	2,604	89,137	115,011	69,233	253,381	255,965
Provincial Total Class B (Women's Hospitals and Dispensaries).	1,019	20	180	1,231	29,303	4,284	12,215	45,818	47,662
Combined Provincial Total	2,837	332	454	3,835	118,440	119,295	81,448	329,199	333,627

Baluchistan.

Provincial Total Class A (General Hospitals and Dispensaries).	522	144	62	708	31,243	30,129	16,175	77,553	78,351
Provincial Total Class B (Women's Hospitals and Dispensaries).	120	80	80	180	5,235	2,406	2,608	10,450	10,555
Combined Provincial Total	642	224	142	904	36,478	32,535	18,783	88,012	88,906
GRAND TOTAL	150,060	10,903	12,084	162,652	5,619,308	4,630,025	5,243,697	13,404,000	13,500,963

(c) is not a first class medical woman, i.e., does not possess a medical qualification registrable in the United Kingdom under the Medical Act or an Indian or Colonial qualification registrable in the United Kingdom under that Act;

(d) cannot produce a certificate of health and character.

Provided that the Central Committee shall, at any time, have power to promote to the service ladies not possessing the above qualifications, but who have shown marked capacity.

8. Members of the Service shall be appointed by the Central Committee to serve in the several provinces. Conditions of service.

7. Members of the Service on appointment shall engage for general service anywhere in India and Burma and shall serve a period of probation in one of the larger hospitals of the province to which they are posted, extending, in the case of those recruited in England, to six months and, in the case of those recruited in India, to three months.

At the end of such period of probation their appointment shall be confirmed or terminated, as the case may be, by order of the Central Committee on the report of the Provincial Committee of the Countess of Dufferin's Fund, hereinafter called the Provincial Committee, after consultation with the authority or authorities financially concerned. (Fide rule 8 *infra*.)

After confirmation, service shall, at any time, be terminable on three months' notice on either side, and the Central Committee shall have power to dispense with the services of any member of the Service on the payment of three months' salary in lieu of notice.

8. Members of the Service shall receive their pay and allowances from the Central or Provincial Committees of the Countess of Dufferin's Fund, unless their services are lent to Government, or to local or Municipal bodies, or to special institutions on the condition that the whole or part of their pay be met by such employers, hereinafter called the authority or authorities financially concerned.

9. Members of the Service shall receive a salary of Rs250 during their period of probation, and thereafter a salary of Rs400 from the 1st to the 4th year inclusive, Rs500 from the 5th to the 7th year, Rs600 from the 8th to the 10th year and Rs650 after the 10th year: Provided that no member of the Service shall be confirmed in the Rs400 grade unless she has passed an examination in such particulars as the Provincial Committee shall prescribe within one year of her appointment.

In addition suitable quarters shall be provided free of rent; or, a house-rent allowance to be determined by the Provincial Committee after consultation with the authority or authorities financially concerned (vide rule 8 *supra*) shall be granted in lieu of it.

10. Members of the Service shall be entitled to travelling allowances on the scale and subject to the conditions set out in Appendix I to these rules.

11. Members of the Service shall be entitled to leave according to the regulations set out in Appendix II to these rules.

12. Members of the Service shall join a Provident Fund on the terms and subject to the conditions set out in Appendix III to these rules.

13. Members of the Service shall be permitted to engage in private practice provided that such private practice does not interfere with the performance of their official duties.

The Provincial Committee shall have power to dispense in any case, after consultation with the authority or authorities financially concerned (vide rule 8 *supra*) if private practice does in fact interfere with the performance of official duties.

Position in
respect of
Central,
Provincial and
Local
Committees,
etc.

14. Members of the Service shall retire on attaining the age of 48 years unless the Central Committee, on the recommendation of the Provincial Committee, after consultation with the authority or authorities financially concerned (*vide* rule 8 *supra*), desire to retain their services for a further period to be determined by them.

15. When appointed to a province, members of the Service shall forthwith become subordinate to the Provincial Committee in all matters, and they shall not correspond with the Central Committee except through the Provincial Committee.

16. The Provincial Committee shall have powers of disciplinary control over members of the Service, including suspension, but powers of removal or dismissal for inefficiency, misconduct or other valid cause, shall be vested in the Central Committee only.

17. A member of the Service, who has been recruited in England, shall, in the event of notice under rule 7 or removal or dismissal under rule 16 *supra*, receive a sum sufficient to cover her return journey to England.

18. Every hospital shall be in charge of a Local Committee and a member of the Service in independent charge of such hospital shall be entitled to attend all meetings of the Local Committee: provided that if her own action or conduct is called in question she shall retire from the meeting after stating her case.

19. Members of the Service in independent charge of a hospital or other institution shall have full professional control of the hospital or other institution and such powers of administrative control as the Local Committee, with the previous sanction of the Provincial Committee and the Local Government after consultation with the authority or authorities financially concerned (*vide* rule 8 *supra*), may determine.

20. Members of the Service and the hospitals or other institutions under their charge shall be subject to such inspection as the Local Government, after consultation with the Provincial Committee and the authority or authorities financially concerned (*vide* rule 8 *supra*), may determine, due regard being paid to purdah. The Provincial Committee shall have power to depute a member of the Service to inspect hospitals or other institutions within their jurisdiction, reporting to the Provincial Committee.

21. The Central Committee shall have power, in communication with the Provincial Committee, to depute any qualified person or persons to inspect members of the Service and the hospitals or other institutions under their charge.

22. Local Governments shall be requested to frame rules for the appointment, suspension, removal or dismissal of Assistant or sub-Assistant surgeons, matrons, nurses, subordinate and menial staff, in hospitals, or other institutions in independent charge of members of the Service with due regard to the position of such members on the one hand and of the Provincial Committee and the authority or authorities financially concerned (*vide* rule 8 *supra*) on the other.

23. Local Governments shall be requested to frame rules, after consultation with the Provincial Committee and the authority or authorities financially concerned (*vide* rule 8 *supra*), for the inspection by members of the Service of branch dispensaries or other medical institutions in charge of women.

24. The decision of the Central Committee shall be final in all cases.

25. The Central Committee reserve power to alter these rules from time to time after consultation, where necessary, with Local Governments and Provincial Committees.

Appendices to the Rules for the Women's Medical Service for India.

NOTE.

The following Travelling Allowance, Leave and Provident Fund rules have been framed for the members of the Women's Medical Service for India, and shall be binding on the Provincial or Local Committees who will have no power to exceed them without the sanction of the Central Committee. That body, while reserving to itself the right to alter the rules from time to time, as experience may show the advisability, or to vary them in cases of individual hardship, desires it to be understood that the rules shall in general be adhered to and that applications for exceptional treatment will only be entertained for very special reasons.

APPENDIX I.

Travelling Allowance Rules.

1. A member of the Women's Medical Service appointed in England shall receive a sum of £70 to cover her passage and incidental expenses; and shall receive travelling allowance from the port of disembarkation to the station to which she is first appointed under the rules below at the rates for transfers. A member appointed in India shall receive travelling allowance under the rules below at the rates for transfers from her place of residence to the station to which she is first appointed.

2. Travelling allowance is divided into two classes —

(a) on transfer from one station to another ;

(b) on ordinary or inspection duty when the member's head-quarters are not changed.

Travelling is also divided into two classes —

(1) journeys by rail or steamer:

(11) journeys by road. This includes all portions of a journey, however short, performed by road between the member's place of residence and the railway station, between the railway station and the new place of residence, between railway stations, road journeys proper, etc. Each portion of a journey performed by road which is followed by a journey by rail shall be considered separately.

3. The travelling allowance for ordinary journeys by rail shall be 1½ first class fares and one third class ticket for a servant, if taken. In the case of transfers the member shall be allowed in addition another third class fare, should 3 servants be taken, and the cost of conveyance of the excess luggage actually taken up to a limit of ten maunds, in support of which she must attach a certificate. The rates shall be the same for journeys by steamer where board is not included in the fare. Where it is included, only one first class fare shall be allowed.

4. For travelling by road, should the distance travelled exceed 5 miles, the member shall be given an inclusive rate of 8 annas per mile in the case of ordinary journeys; in the case of transfer the rate shall be Rs 1 per mile. For portions of a journey of less than 5 miles performed by road the member shall receive on ordinary journeys the actual expense of conveying herself, her servant and luggage up to a limit of Rs 2-8, on production of a certificate from her of the amount actually spent. On transfer the limit is Rs 2-8.

5. The cost of travelling allowances shall be defrayed as follows :—

In the case of transfer from one Province to another, by the Central Committee.

In the case of journeys within the Province, by the Provincial Committee.

Example.—A member travels on ordinary duty from A to B. She travels 3 miles by road from her residence to the railway station at A and by rail from A to X : from X she travels by road 4 miles to railway station Y and from Y by rail to station Z : from Z she travels 20 miles by road to B. She shall be entitled to actual expenses, subject to a limit of £12-8 in each case, for the road journeys from her residence to railway station A, and from railway station X to railway station Y. She shall be entitled to £10 for the journey from railway station Z to B, whether the actual expenses are more or less than this sum. For the railway journeys from A to X and Y to Z she shall receive $1\frac{1}{2}$ first class fares and a third class fare for a servant, if one is taken.

APPENDIX II.

Leave Rules.

All members of the Women's Medical Service shall be subject to the same leave rules.

The following are the varieties of leave admissible :—

- (a) Casual Leave.
- (b) Privilege Leave.
- (c) Furlough.
- (d) Sick Leave.
- (e) Extraordinary Leave.

2. Casual leave is occasional leave for a few days, and may be granted at the discretion of the Provincial or Local Committee. Such leave cannot be combined with any other kind of leave.

3. Privilege leave is earned at the rate of one month for each calendar year of service, but may be granted during the year in which it is being earned, *e.g.*, A, who joins the service on 1st April 1915, is eligible for one month's privilege leave during the summer of 1915 and for a second month's privilege leave on or after 2nd April 1916. This leave is meant to provide a month's holiday during the year and not to be accumulated. In the event, however, of its being found impossible to grant any member privilege leave during the year, she may carry the month's privilege leave refused her to her credit. But in no case can privilege leave be accumulated beyond a limit of 3 months. In the event of privilege leave being so refused, an entry should be made by the Provincial Committee so as to enable the leave to be taken to credit, and in the case of transfer the fact should be notified to the Committee concerned. Privilege leave, taken by itself, can be granted by the Provincial or Local Committee.

4. Furlough is earned at the rate of two months for each year's presence on duty—in which is included privilege and casual leave—and furlough earned and not taken remains at credit throughout a member's service. More than eight months' furlough shall not, however, be granted at one time, and first furlough shall not be granted until after four years' active service from the date of joining. Furlough, moreover, shall not be granted until after three years' active service from the date of the last return from furlough, sick leave or extraordinary leave exceeding one month. Any privilege leave which is due during the year or which has accumulated in accordance with Rule 3 may be prefixed to furlough.

Study leave shall be added to furlough and shall not exceed three months, at any time, and shall not be less than one month, and shall not exceed nine months in the member's total service. Certificates proving study leave claims must be submitted to the Central Committee.

Any member on study leave shall receive two-thirds of her average monthly pay, during such period instead of one-half (see Rule 6).

5. Sick leave can be granted at any time on production of a medical certificate from the Civil Surgeon. Such leave cannot, however, be taken in excess of one year at any time, and in all to a total extent exceeding two years. Any periods of sick leave taken in excess of these maxima must be taken as extraordinary leave. Privilege leave may be prefixed to sick leave in the same way as to furlough.

6. Extraordinary leave may be granted at any time at the discretion of the Central Committee. Any privilege leave due may be prefixed to extraordinary leave, but extraordinary leave (i) may not be taken without all the privilege leave due being prefixed to it and (ii) may not be taken when furlough is due or sick leave can be granted. An exception to the latter proviso (ii) is that Provincial or Local Committees may grant extraordinary leave up to a limit of one month where special circumstances exist and where the member can be spared without inconvenience. Any period of extraordinary leave so taken shall not count as active service for the purpose of Rule 4, though, as explained in that rule, it will not operate so as to prevent the member taking furlough until after three years from her return from it.

7. Furlough or sick leave may be extended by the grant of extraordinary leave; and furlough may be extended by the grant of sick leave, on production of a medical certificate to the satisfaction of the Central Committee, but in the latter case the total leave shall not exceed one year and shall be subject to the proviso that the period of extension shall not cause the limit of two years admissible as sick leave to be exceeded.

8. The allowances during leave shall be as follows:—

Casual and privilege leave, the full pay that is being drawn at the time the leave is taken.

Furlough and sick leave, half the average monthly pay of the six months' presence on duty immediately preceding the taking of the leave (see also Rule 4).

When such leave is combined with privilege leave, the six months shall be calculated from the date of departure on combined leave.

Extraordinary leave, no allowances.

All leave allowances shall be paid in India, and members proceeding out of India must make their own arrangements to draw their allowances in India.

9. Except in the case of casual leave, privilege leave or extraordinary leave not exceeding one month, leave shall be granted by the Central Committee, to whom applications should be submitted through the Provincial or Local Committee.

Example.—A joined the service on 1st April 1916. She takes one month's privilege leave in the summers of 1916, 1916, and 1917. In 1918 she cannot be spared and in 1919 only two weeks' privilege can be granted. On 15th April 1920 she takes 2½ months' privilege leave combined with 8 months' furlough, returning to duty on 1st March 1921. In the summer of 1921 she takes one month's privilege leave combined with one month's extraordinary leave and does the same in the summer of 1922. In 1923 she cannot be granted privilege leave, and she desires to go on combined leave in 1924. She will have

completed three years' active service from her last return from furlough on 1st May 1924 as the two months' extraordinary leave does not count as active service, and the total amount of furlough earned by her will be $\frac{2}{3}$ th of the period—1st April 1916 to 1st July 1920—the date of completion of her privilege leave—(5 $\frac{1}{2}$ years) *plus* $\frac{1}{3}$ th of the three years completed on 1st May 1924, *i.e.*, $\frac{1}{3}$ th of 8 $\frac{1}{2}$ years, or one year 4 $\frac{1}{2}$ months. She has, therefore, 16 $\frac{1}{2}$ — 8 months = 8 $\frac{1}{2}$ months' furlough to her credit and can take 8 months' furlough from 1st May 1924, and as she is entitled to 2 months' privilege leave which counts as active service, she can actually depart on combined leave on 1st March 1924.

APPENDIX III.

Provident Fund Rules.

Every member of the Service is required to contribute monthly to the Provident Fund a sum equivalent to 5 per cent. of her salary. Subscription on leave of any kind shall be optional. The amount of subscription shall be 5 per cent. of the leave allowances admissible during the leave. The contribution shall be deducted from each month's salary or leave allowances and credited to the member's account in the Provident Fund.

2. The Association shall contribute to each subscriber's account on the 1st April and 1st October of each year a sum equivalent to the amount of the contributions of the subscriber during the six months immediately preceding.

3. Each subscriber's account shall be credited with interest on the amount standing at its credit at the rate of 4 per cent. per annum or at such rate as the Central Committee can invest without risk to the funds of the Association.

4. The sum which accumulates to the credit of a subscriber shall be repayable to her —

(1) on retirement after approved service ;

(2) on resignation on account of ill-health.

Provided that no subscriber shall be paid the amount of the contribution made to her account by the Association with the interest thereon unless she has rendered not less than 5 years' approved service or unless she is incapacitated by disease contracted in and by the service.

5. The dismissal from the service, by the Central Committee, of any subscriber shall involve forfeiture of the contributions by the Association and the interest thereon.

6. In the event of the death of a subscriber before retirement or after retirement, but before the money has been handed over, it shall be paid to the legal representative of the estate.

7. Absolutely necessary advances against the sum to the subscriber's credit, and ordinarily not exceeding three months' pay, may be made to meet emergent expenditure, at the discretion of the Central Committee. Such advances shall be repayable by instalments to be fixed by the Central Committee in each case.

8. Each subscriber shall be furnished once a year with a statement of her account.

9. The Central Committee may revise these rules as it considers necessary.

APPENDIX VI.

List of Lady Doctors who were first selected for the Women's Medical Service for India by the Sub-Committee of the 10th December 1913 and approved by the Central Committee.

BALFOUR, Miss M. I., M.D.
 BARNES, Mrs. F. D., M.D.
 BATHO, Miss M. L., L.Y.P. & S.
 COMMISSARIAT, Miss S. H., F.R.C.S.
 COPELAND, Miss P. T., M.D.
 ENGINEER, Miss J. B., L.R.C.P. & S. (*Application since withdrawn*)
 GEORGE, Miss J. E., L.R.C.P. & S.
 LAUDER, Miss H., M.D.
 LEACH, Miss F. B., M.D.
 LEONARD, Miss O. T., M.B., Ch.B.
 MACLAREN, Miss H. J. C., M.B., Ch.B.
 MALABARI, Miss P. B., L.R.C.P. & S. (*Application since withdrawn*)
 MA SAW SA, Miss, F.R.C.S., D.F.H.
 MCKENZIE, Miss A. L., M.D.
 MURPHY, Miss M. C., M.B.
 NAGAOJI, Miss M. A. D., M.B., Ch.B.
 O'BRIEN, Miss M., M.B., B.S.
 O'NEILL, Miss K. M., M.B.
 PLATT, Miss K. A., M.B., B.S.
 PRATT, Miss D. E., M.D.
 SCOTT, Miss F. A., L.R.C.P. & S.
 WATTS, Miss A. M., L.R.C.P. & S.
 WEBB, Miss M. V., L.R.C.P. & S.
 YAMINI SEN, Miss, F.R.F.P. & S.

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2. The Association shall contribute to each subscriber's account on the 1st April and 1st October of each year a sum equivalent to the amount of the contributions of the subscriber during the six months immediately preceding.

3. Each subscriber's account shall be credited with interest on the amount standing at its credit at the rate of 4 per cent. per annum or at such rate as the Central Committee can invest without risk to the funds of the Association.

4. The sum which accumulates to the credit of a subscriber shall be repayable to her —

(1) on retirement after approved service ;

(2) on resignation on account of ill-health.

Provided that no subscriber shall be paid the amount of the contribution made to her account by the Association with the interest thereon unless she has rendered not less than 5 years' approved service or unless she is incapacitated by disease contracted in and by the service.

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 WEBB, Miss N. V., L.R.C.P. & S.
 YAMINI SEN, Miss, F.R.F.P. & S.

APPENDIX VII.

Summaries of Reports of certain Branches and Native States.

THE UNITED KINGDOM BRANCH.

Patron.

HER MOST GRACIOUS MAJESTY QUEEN ALEXANDRA.

President.

THE DOWAGER MARCHIONESS OF DUFFERIN AND AVA, V. & A., C.I.
Vice-President.

LADY GRANT DUPP, C.I.

Executive Committee.

The MARCHIONESS OF LASSDOWNE, C.I.

The LADY HELEN MUNRO-FERGUSON.

LADY HAYLEY.

LADY LYALL.

LADY ELLIOT.

SIR PHILIP HUTCHINS, K.C.S.I.

SIR ANDREW SCOTLE, K.C.S.I.

SIR COURTNEY ILBERT, G.C.B., K.C.S.I.

The LADY WENLOCK, C.I.

SIR T. W. HOLDENESS, K.C.S.I.

SURGEON-GENERAL SIR BENJAMIN FRANKLIN, K.C.I.E.

SIR WALTER LAWRENCE, BART., G.C.I.E.

Selection Committee.

SURGEON-GENERAL SIR R. HAVELOCK CHARLES, G.C.V.O.

MRS. SCHARLIED, M.D., M.S.

MISS GRACE MACKINNON, M.D.

General Committee.

The LADY EDWARD CAVENDISH.

ALICE, COUNTESS OF STRAFFORD.

SUSAN, COUNTESS OF MALMESBURY.

The LADY WASTAGE, M.H.O.

The LADY EMMA CRICHTON, C.I.

The EARL BRASSEY, G.C.B.

VISCOUNT HYTHE.

The Hon. DUDLEY RYDER.

SIR THOMAS FOWELL BUXTON, BART., G.C.M.G.

LADY BERNARD.

GENERAL SIR EDWARD CHAPMAN, K.C.B.

SIR THOMAS SUTHERLAND, G.C.M.G., M.P.

MRS. ROWAN HAMILTON.

LADY ILBERT.

SIR H. C. BURDETT, K.C.B., K.C.V.O.

LIEUT.-COLONEL HARRY COOPER, C.M.G.

MR. J. J. J. KESWICK.

THE LORD BURNHAM, K.C.V.O.

SURGEON-GENERAL A. PAYNE.

MR. W. T. PRITCHARD.

MR. DANIEL WATNEY.

Honorary Secretary.*

DOWAGER MARCHIONESS OF DUFFERIN AND AVA,

Clandeboyne, Co. Down, Ireland.

Treasurer.

CHARLES MOORE, Esq.

Bankers.

Messrs. COURTS & Co., 59, Strand, London, W.C.

* It is desired that all ordinary correspondence be addressed to DOWAGER LADY DUFFERIN
Scholars coming to England to address their letters to Mrs. BELL, 12, St. Leonard's Rd
Ealing, London.

Subscriptions to be paid either to DOWAGER LADY DUFFERIN, or to Messrs. COURTS & Co.

Annual Report.

The quiet work of the United Kingdom Branch of the Countess of Dufferin's Fund has been carried on as usual this year, but in India changes are being made with a view to improve the position of women doctors, and to provide further facilities for the medical education of female students.

By the report of 1912 we learn that the Central Committee hoped to obtain a special grant from Imperial Revenue, by the aid of which a definite Medical Service of a limited number of medical women would come into being.

That hope has been realised, the Government has sanctioned an annual grant to be paid to the "National Association for supplying Female Medical Aid to the Women of India"; and a new service, to be called "The Women's Medical Service for India," has been formed.

It is to consist of twenty-five first class medical women appointed and paid by the Central Committee to serve in various parts of India. Twenty-four of these have already been selected, eight of whom are women to whom the United Kingdom Branch had given scholarships, thus enabling them to qualify for these posts of honour. Two of these were specially mentioned in our last report as having done remarkably well, one, Miss Yamini Sen, having taken a scholarship at Glasgow, the other, Miss Ma Saw Sa, having been equally successful in Dublin. The last instalment of her scholarship was paid during the year under review.

For the recruitment of this Women's Medical Service one sub-committee was appointed in India. In England another, consisting of a medical man and two medical women conversant with conditions in India, was to be appointed by the Committee of the United Kingdom Branch.

The Committee was very fortunate in obtaining the consent of Sir Havelock Charles and of Mrs. Scharlieb to act on this Committee, but the second lady has not yet been appointed.*

The Executive Committee, with these two new members, met in November.

* * * *

has already been promised fifteen lakhs by the Princes of India.

I trust that, seeing the value of the United Kingdom Branch Scholarships to the work being carried on in India, its subscription list may grow longer, and that we may be enabled to help many more Indian and Anglo-Indian women to obtain qualifications fitting them for the highest posts in the Women's Medical Service for India.

HARIOT DUFFERIN AND AYA.

* Since this report issued a second Lady Doctor, Miss Grace MacLennan, M.D., has been appointed.

SUBSCRIPTIONS.

	£	s.	d.
Honourable Mrs. Arthur	2	2	0
Mrs. Bell	1	0	0
Mrs. Benson	1	0	0
Miss Bookey	1	0	0
Earl Brassey	3	3	0
Dowager Lady Broadbent (donation)	5	5	0
Lord Burnham	1	0	0
Sir F. Howell Buxton	5	0	0
Mrs. Caldwell	1	0	0
Gen. Sir E. Chapman	0	10	6
Stanley Cochrane, Esq.	2	2	0
Colonel H. Cooper	1	0	0
Mrs. Corry	1	0	0
Lady E. Crichton	5	0	0
Miss Darley	1	0	0
Mrs. Hume Dudgeon	1	1	0
Lady Grant Duff	3	3	0
Dowager Marchioness of Dufferin	5	0	0
Miss Erck	0	10	0
Mrs. Fowler	0	10	0
Lady Helen Munro Ferguson	1	1	0
Viscount Hythe	2	2	0
Mrs. Rowan-Hamilton	1	0	0
Mrs. G. Rowan-Hamilton	1	1	0
Colonel Rowan-Hamilton	2	2	0
Sir Philip and Lady Hutchins (1912-13)	4	4	0
R. Hardie, Esq.	1	1	0
Misses L. and P. Jennings	1	0	0
Miss Kingan	2	2	0
C. H. L.	0	10	0
Marquis of Lansdowne	1	0	0
Mrs. Loch	1	1	0
Sir J. B. Lyall	2	2	0
Miss Maconachy	0	10	6
Mrs. Percival-Maxwell	2	0	0
Miss Monk	3	0	0
Mrs. Moorehead	2	0	0
Sir Arthur Nicholson	2	2	0
Lady D'Arcy Osborne	2	0	0
Lady Plowden	0	10	0
Mrs. Quin	1	0	0
Mrs. Quinn	1	0	0
Miss Ramsden	3	0	0
Lady Reay	2	0	0
Mrs. Arthur Riall	1	0	0
Sister Superior (St. John the Divine)	1	11	0
Miss Isabel Sanders (donation)	10	10	0
Duchess of Somerset	1	1	0
Alice, Countess of Strafford	1	1	0
Lady Vincent	1	1	0
Lady Wantage	10	0	0

£108 19 0

Statement of Accounts of the United Kingdom Branch of the Countess of Dufferin Fund from 1st January 1913 to 31st December 1913.

RECEIPTS	Details	Total.
	£ s. d.	£ s. d.
Balance at Bank on January 1st, 1913	226 1 2	226 1 2
Subscriptions Receipts.	106 19 0	
Draft from Central Committee in India (six months' Scholarship for Miss Van Ingen)	12 0 0	
Dividends on £1,874 0s 3d. Manchester Corporation 3 per cent. Stock	66 4 4	
Dividends on £440 Preference Stock London and South Western Railway	14 10 0	
Gilchrist Educational Trust	150 0 0	
Refunded Income Tax up till April 1913	0 18 0	
		340 11 4
		566 12 6

EXPENDITURE.	Details	Total.
	£ s. d.	£ s. d.
Scholarships—		
Miss Edith Pauli	75 0 0	
Miss Delphine d'Abreu	50 0 0	
Miss Ma Saw Sa	25 0 0	
Miss Kathleen Wall (grant)	50 0 0	
Miss Mary Van Ingen (scholarship loan)	12 0 0	
		212 0 0
Printing Report—D E Alexander . . . . .	.....	1 12 4
Balance at Bank December 31st, 1913 . . . . .	...	353 0 2
		566 12 6

£150 0s. 0d. paid by the Gilchrist Educational Trust was remitted to the Bank of Bengal after the accounts were audited, thus reducing the 1913 balance to £203 0s 2d.

Examined and found correct.

The 31st January 1914.

ROBERT LOGAN.

Sums Received and Expended 1901 to 1913 by the United Kingdom Fund.

RECEIPTS.

Subscriptions and Donations, and Interest on Deposits and Investments, and Grant of £150 from Gilchrist Trustees, for the past 13 years :—

	£	s.	d.
1901 . . .	421	12	2
1902 . . .	394	4	0
1903 . . .	447	11	6
1904 . . .	405	17	11
1905 . . .	375	16	4
1906 . . .	353	0	0
1907 . . .	625	17	2
1908 . . .	387	13	1
1909 . . .	355	18	3
1910 . . .	334	5	11
1911 . . .	343	15	5
1912 . . .	403	1	11
1913 . . .	340	11	4

EXPENDITURE.

Expenditure on objects of the Fund.

	£	s.	d.
1901 . . .	383	7	0
1902 . . .	339	12	2
1903 . . .	234	5	0
1904 . . .	394	10	6
1905 . . .	439	2	6
1906 . . .	876	4	2
1907 . . .	519	17	3
1908 . . .	312	6	8
1909 . . .	256	14	6
1910 . . .	325	13	4
1911 . . .	243	17	4
1912 . . .	400	13	4
1913 . . .	363	12	4

Baluchistan Branch.

Quetta.—The report submitted by Miss E. M. Cardozo, L.B.C.P. & S., the Lady Doctor in charge of the Dufferin Hospital, runs as follows :—“During the year under report the work has been steadily progressive and the institution has kept up its increasing popularity amongst the Indian women and children of the respectable classes for whom the hospital is reserved. The lower classes have the two Mission hospitals and the Civil hospital at their disposal.

The number of new out-door patients was 5,072, the increase being 797 over last year. A number of these were from the 106th Hazara Lines and 2nd Mule Corps Lines.

The in-patients numbered 90. There were no long-continued cases this year and 16 more patients could have been accommodated. Many respectable women had to be denied admittance.

The daily average attendance has been slightly over 71. No more can be attended with justice with the present staff.

The Obstetrical cases were 34. They were varied and some were very instructive.

The number of operations was 122 against 125. Some operations which had been removed from the latest edition of the Nomenclature were entered in last year's report but omitted this year, hence the number showed less though actually it has been much higher.

Patients treated at home were 65 against 40 last year: Rebecca dai and nurse is very popular and capable and has done good work in private homes.

There have been no changes in the staff. The matron's pay was increased to Rs80 a month early in the year, and a small godown was enlarged and made into a kitchen for her use, the cost of which Rai Bahadur Diwan Jamait Rai, C.I.E., has promised to defray.

A new hospital is absolutely necessary on a new site. The present building is unsuitable and insanitary. No further progress can be maintained under present conditions.

A slight outbreak of enteric and measles occurred in the hospital. The matron was the first victim. As soon as her case was proved to be enteric, the whole staff were inoculated. There were no deaths.

In the Patel Ward of the Civil Hospital, Quetta, 256 indoor cases were treated. Of these 225 were Muhammadans and 31 Hindus. There were 16 confinements and one abortion case. As in previous years, the whole available accommodation has been full throughout the year. More accommodation could easily be utilized as that available is quite inadequate for the number of patients seeking admission."

Sibi.—As regards the Melvor Women's Dispensary, Miss A. Alfred, L.M.S., reports that :—"The hospital continues to be well attended by all classes of people. More relief would be possible had we sufficient accommodation. an indoor ward at Sibi and facilities for major operations.

A new hospital building is being proposed by the authorities.

The number of new patients treated during the year was 3,638 including 50 in-door, against 4,200 including 63 in-door. The decrease of 422 may be accounted for by the fact that at Ziarat the season was a healthier one this year. At the village visiting at Ziarat 331 new patients were treated and 181 cases of diseases peculiar to women, against 230. The above number includes 11 midwifery cases, out of which 4 were normal labour cases and 7 abnormal.

Thirty-two cases with fees and 20 without fees were treated at their homes.

There were 51 operations performed. A number of operations had to be refused, as it is difficult to manage operations without assistance.

The employment of a dresser is a great comfort to the patients. I may be allowed to offer my thanks to Her Excellency Lady Hardinge, the Lady President, who has been most kind to think of the little hospital at Ziarat and of the poor ignorant women there, by supplying two midwifery beds for that hospital and also for offering Rs100 a year for the most needed requirement.

Mrs. Ramsay, Lady President of the Baluchistan Branch, Mrs. Archer and Mrs. Duke, have been very kind in visiting the hospital here and at Ziarat and also by subscribing towards the Dispensary Fund, which is a very limited one."

Fort Sandeman.—The Lady Superintendent says :—"During the year under report the Hospital and Dispensary remained open throughout, but owing to Miss Nebemiah's illness in January, I was not able to enter all the work done and therefore many dates are blank and the full number of patients who attended cannot be given.

The total number of in and out-patients during the year was as follows :—51 in-patients against 47. Total new dispensary patients 2,467 against 1,977; total new and old 5,186 against 5,126; patients visited in their own homes 42 against 17. Among the new dispensary patients, village patients numbered 761 against 520. Daily average 18.07 against 17.3. There were 26 minor operations against 41.

Sums Received and Expended 1901 to 1913 by the United Kingdom Fund.

RECEIPTS.				EXPENDITURE.			
Subscriptions and Donations, and Interest on Deposits and Investments, and Grant of £150 from Gilchrist Trustees, for the past 12 years :—				Expenditure on objects of the Fund.			
		£	s. d.			£	s. d.
1901	. . .	421	12 2	1901	. . .	383	7 0
1902	. . .	394	4 0	1902	. . .	339	12 2
1903	. . .	447	11 6	1903	. . .	234	5 0
1904	. . .	405	17 11	1904	. . .	394	10 6
1905	. . .	375	16 4	1905	. . .	439	2 6
1906	. . .	353	0 0	1906	. . .	876	4 2
1907	. . .	625	17 2	1907	. . .	519	17 3
1908	. . .	387	13 1	1908	. . .	312	6 8
1909	. . .	355	18 3	1909	. . .	256	14 6
1910	. . .	334	5 11	1910	. . .	325	13 4
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Baluchistan Branch.

Quetta.—The report submitted by Miss E. M. Cardozo, L.R.C.P. & S., the Lady Doctor in charge of the Dufferin Hospital, runs as follows :—“ During the year under report the work has been steadily progressive and the institution has kept up its increasing popularity amongst the Indian women and children of the respectable classes for whom the hospital is reserved. The lower classes have the two Mission hospitals and the Civil hospital at their disposal.

The number of new out-door patients was 5,072, the increase being 797 over last year. A number of these were from the 106th Hazara Lines and 2nd Mule Corps Lines.

The in-patients numbered 90. There were no long-continued cases this year and 16 more patients could have been accommodated. Many respectable women had to be denied admittance.

The daily average attendance has been slightly over 71. No more can be attended with justice with the present staff.

The Obstetrical cases were 34. They were varied and some were very instructive.

The number of operations was 122 against 125. Some operations which had been removed from the latest edition of the Nomenclature were entered in last year's report but omitted this year, hence the number showed less though actually it has been much higher.

Unfortunately owing to illness Mrs. Henderson was unable to return to the office of her leave, and from the 5th October to the 1st January Mrs. Derry acted for her.

When we take all these circumstances into consideration the results for 1912 are very encouraging. A proposal is now under consideration to appoint a female Sub-Assistant Surgeon, so as to avoid the necessity for taking the Assistant Surgeon when the Lady Doctor takes leave.

The out-patients for 1912 numbered 4,000 as compared with 3,500 in 1911. The in-patients were 172 as compared with 141 in 1911. Major operations were 22 in number as compared with 16 and minor operations 155 as compared with 140.

When we turn to the labour cases which were one of the most prominent features of the year's work, and where it is almost impossible to keep the hospital remains regularly open, this Department of the work will appear greater in the hands of Dera Ismail Khan and Rawalpindi.

During the year 43 labour cases were dealt with as compared with 31 in 1911.

It is noteworthy that several cases were from long distances to hospital and labour in the hospital."

Malakand.—Report by Captain F. H. Macdonald, D.O. Surgeon, Malakand.—
"The Women's section of the Lady Datta Hospital is situated at a high level, and assisted by the Indian Fund. Mrs. Datta, who was in charge of the hospital from 15th May 1912. Mrs. Datta, who was in charge of the hospital from 15th May and resigned on the 1st July 1912, was succeeded by Mrs. Datta, who was appointed but another is shortly expected."

The number of patients treated during the year was 1,000 in the hospital and 180 in the out-patient department. Eighteen major and 160 minor operations were performed. There were 100 cases of diseases peculiar to women treated. Two cases of malaria, about 100 cases of skin diseases and 100 cases of other diseases were treated.

NATIVE STATES.

Rajputana.

Reports are furnished on the following institutions by the Chief Medical Officer:—

- I. The Jaswant Hospital for Women, Jodhpur.
- II. The Victoria Jubilee Hospital, Kotah.
- III. The Walter Women's Hospital, Tonk.
- IV. The Mayo Hospital, Jaipur.
- V. The Lady Dufferin Hospital, Alwar.
- VI. The Women's Hospital, Bharatpur.
- VII. The Women's Hospital, Bikaner.
- VIII. The Walter Zenana Hospital, Udaipur.
- IX. The Women's Dispensary, Beawar.

Jodhpur.—Miss B. G. C. Griffen, M.B., B.C.H., B.A.O., has been in charge of the Jaswant Hospital throughout the year. There were 96 in and 4,014 out-door patients treated against 71 in and 3,278 out-patients in the previous year.

There were 4 major and 66 minor operations performed against 9 and 83, respectively, in 1912.

Kotah.—Miss J. Newton, L.R.C.P. & S., L.F.P.S., has been in charge of the Victoria Jubilee Hospital throughout the year. There was a considerable decrease in the number of out-door attendance, due to the Lady Superintendent having been sent to Bhuj for the treatment of Her Highness the Maharani Sahiba. The Female Sub-Assistant Surgeon who is in sole charge of the hospital is reported to be very popular in Kotah.

There were 272 operations performed in 1913, against 290 in the previous year, of which the following were important:—Excision of fibroma 1, and excision right breast for carcinoma 1.

Tonk.—Miss K. Reed, L.R.C.P. & S., L.F.P. & S., L.M.B.C.P., has been in charge of the Walter Women's Hospital throughout the year. There were 221 in and 7,327 out-door patients treated as compared with 219 in and 8,187 out in 1912. The decrease in the out-door attendance was partly owing to the outbreak of cholera in Tonk and partly to marked decrease in the prevalence of malaria on account of scanty-rainfall.

There were 360 operations performed against 401 in 1912.

Jaipur.—Miss L. E. Sykes, M.D., L.R.C.P. & S., has been in charge of the women's wards of the Mayo Hospital, throughout the year. There was an increase of 1,460 out-door attendance as compared with the previous year, due to the absence of epidemic disease in the Jaipur City.

There were 120 patients visited at their homes against 96 in 1912.

The compounding, dressing and nursing in the women's wards is entirely done by females.

Alwar.—Sub-Assistant Surgeon Bala Bai has been in charge of the Dufferin Hospital, throughout the year. No Lady Superintendent has been appointed since April 1911. The number of in and out-door patients treated were respectively 325 and 14,435 against 417 and 13,572 in 1912; 856 patients were visited at their homes as compared with 704 in the previous year. Twenty-one purdah ladies were admitted as in-patients and 403 purdah women attended the institution against 26 and 359, respectively, in 1912.

There were 69 major and 797 minor operations performed against 65 and 741, respectively, in the previous year.

Bharatpur.—Sub-Assistant Surgeon Bibi Rup Kaur in charge of the women's hospital resigned her appointment on the 1st September 1913, from which date the institution was in the additional charge of a male Sub-Assistant Surgeon attached to the Victoria Hospital. The appointment is still vacant, as no Hindu candidate has yet been available. There were 265 in and 5,210 out-door patients treated against 280 in and 6,129 out-patients in 1912; this decrease was due to the absence of a Female Sub-Assistant Surgeon for the last 3 months of the year.

Bikaner.—Sub-Assistant Surgeon Elizabeth Mojiram has been in charge of the women's wards of the Bhagwan Das hospital throughout the year. There was a decrease in both the in and out-door attendance as compared with the previous year, attributable to the healthiness of the year.

There were 117 major and 623 minor operations performed against 126 and 551, respectively, in 1912. The work done was generally satisfactory.

A new women's hospital is nearly completed.

Udaipur.—There has been neither a Lady Doctor nor a Female Sub-Assistant Surgeon in the Walter Zonana Hospital since the 16th April 1913, the former having resigned on the 16th April and the latter on the 22nd April 1912. From the 1st December 1912 to the 15th April 1913, 65 in and 1,755 out-patients were treated against 714 and 2,837, respectively, in 1912.

A compounder from the Lansdowne Hospital looks after the surgical instruments, appliances and furniture in the hospital.

Qualified female medical aid is urgently needed for the women of this place.

Beawar.—Sub-Assistant Surgeon Pandita Sundar Lall was in charge of the female ward of the Charitable dispensary up to the 30th April 1913, when she resigned. The dispensary was closed up to the 14th September, when Sub-Assistant Surgeon Miss Q. Houlton was appointed. Fifty-two in and 5,245 out-door patients were treated against 41 and 9,729 in the previous year.

There were 541 operations of which 34 were important.

The dispensary is getting popular all round and specially so on the surgical side.

Ajmer.—A Female Sub-Assistant Surgeon has not yet been appointed to the women's wards of the Victoria Hospital for want of funds.

Qualified Lady Doctors are decreasing in Rajputana now that the Native States are supervising their own medical arrangements without outside help. It is very noticeable from the returns how little purely obstetrical and gynaecological work is really done in the women's hospitals of the Native States.

Hyderabad (Deccan).

The Director of His Highness the Nizam's Medical Department has very kindly furnished the following account:—

Victoria Zenana Hospital, Hyderabad.—"There were 1,899 in-patients admitted into the hospital, of which 479 were surgical, 474 of general diseases and 946 obstetric cases; of the latter, 514 were natural and 166 operative and 266 were cases of the diseases of the puerperium and pregnancy. The out-patients treated numbered 12,686, making a total, in and out-patients, of 14,585. The number of beds available in this institution for in-patients is 97.

Dudbaoli Dispensary.—The number of out-patients treated was 3,207 and of operations performed 39. These figures represent the work done for 146 days only, as there was no Lady Doctor at this institution for the remaining portion of the year.

Civil Dispensary, Chadarghat.—The number of in-patients admitted into this institution was 4 and the number of out-patients treated 4,867.

Gulbargah Women's Hospital.—This institution provides 6 beds for in-patients. The number of in-patients admitted was 45 and operations performed 72, including 5 obstetric operations. The number of out-patients treated at the hospital was 2,766 and at their houses 65.

Hanamkonda Dispensary.—The number of out-patients treated at the dispensary was 4,092 and at their houses 30; the number of in-patients admitted into the institution in which 2 beds are provided was 12. No operative work was done as the Lady Doctor reports that the women are afraid of instruments and need a great deal of persuasion to submit to surgical treatment. Very little obstetric work is done here as most of the labour cases are conducted by dais.

Aurangabad Dispensary.—There were 3,963 out-patients treated at this institution. The number of in-patients admitted was 52, of which 4 were obstetric and 6 gynaecological. Eighty-six operations were performed, of which 6 were major operations.

Jalna Dispensary.—Twenty in-patients were admitted into this institution, including 6 midwifery cases.

The out-patients numbered 1,733. The number of beds available for in-patients is 5. This institution was without a Lady Doctor for about 6 months in the year, owing to the illness of the permanent incumbent.

The work done in the women's departments of the several dispensaries is satisfactory, notwithstanding that no Lady Doctors were attached to them for some months together."

Travancore and Cochin.

The work done in the State hospitals for the treatment of women during the year 1913 is set forth in the summary below which has been received from the Resident :—

Trivandrum.—Combined Maternity and Women and Children's Hospital.—The total number of midwifery cases was 350, showing an increase of 34 over last year's number. Of these, 267 were treated in the hospital and 83 at their homes.

The total number of operations was 746; of these, 139 were obstetric and of the rest, 405 were minor operations.

A small temporary shed was erected in the beginning of the year.

Mrs. V. S. Alweyn has been transferred to the General Hospital.

Trivandrum.—Female side, General Hospital.—The female medical staff of the hospital comprise a Lady Apothecary with 2 midwives. Mrs. Alweyn, the Lady Apothecary, took charge of the female side of the out-patient department on the 11th April 1913.

The midwives attended on 52 cases, of which 9 were difficult. There was no mortality among the mothers.

Quilon.—Victoria Jubilee Hospital.—During the year under report the number of patients treated was 771 in and 13,577 out against 682 and 9,287 last year.

One hundred and eighty-one major operations were performed during the year, 90 of

which were obstetric. There were 281 maternity cases treated in the hospital and 65 in their own homes.

* Matron Mrs. Quinless retired in May 1913. Two Nursing sisters have been entertained in her place.

Cochin.—Mattanchery, Ernakulam and Trichur.—As in the previous year, the three institutions at Mattanchery, Ernakulam and Trichur, where the separation of sexes was completely effected, continued to work during the year with female medical aid. In the three institutions the results of the year's work were as follows:—

Total women and children treated	43,912
Daily average attendance	309.41
Operations	1,139
Midwifery cases	205
{ Normal	74
{ Abnormal	

During the year a Lady Doctor, 4 female sub-assistant surgeons, 16 midwives, 3 matrons and 4 female compounders were working in the several medical institutions of the State.

There were four stipendiary female medical pupils studying throughout the year one in the Madras Medical College and the other three in the Rayapuram Medical School.

Central India.

Bhopal.—Mrs. F. D. Barnes, M.D., the Superintendent of the Lady Lansdowne Hospital, describes the work accomplished in 1913 as follows.—

"The patients treated in hospital were:—In-patients 302, out-patients 4,632 as against 356 and 5,088, respectively, last year. This was due to the large number of days the hospital was closed to patients owing to unavoidable circumstances. The number of patients treated at their own homes shows a slight increase, being 2,315 in 1913, against 2,088 in 1912.

The House Surgeon Miss Dee and the Matron Mrs. Newman worked throughout the greater part of the year. Both were unfortunately called upon to resign before the completion of the year. The female compounder, Lily Dennis, has done good work and the two pupils in the compounder's class are about to appear for their examination in order to enable them to undertake independent work.

I have had six "Dufferin" *dois* this year under training. Of the class of six women reported last year, three only completed the course and two of these were successful in the final examination, one being placed on the permanent staff of nurses in this hospital and the other being appointed to the Prince of Wales' Hospital, Bhopal.

A class for the training of strictly purdah women as medical students was suggested by Her Highness and a beginning has been made with four pupils. This class is still quite in its infancy and while writing my report, I have to acknowledge the receipt of anatomical models from Messrs. Arnold and Sons, London, as a means of training this class. Next year I hope to give a more detailed account of this special experiment.

It is with much regret I have to report Colonel Haig's absence on furlough and the loss we have thereby sustained. Major Watson, his successor, has, however, taken the keenest interest in our work since his appointment as Agency Surgeon in Bhopal, and we look to him for all the valuable help we have hitherto received.

Her Highness the Ruler of Bhopal continues to take her usual interest in the work and is always an invaluable co-operator in our schemes."

Gwalior.—The Chief Medical Officer and Sanitary Commissioner, Gwalior State, reports as follows:—

"There were 1,550 in-patients treated at the Jaya-Arogya hospital during the year against 1,308 during last year. There was a slight fall in the number of out-patients but the total number has exceeded that of last year. There has been a steady increase in the number of patients seeking for medical relief at the hospital which shows the growing popularity of the institution. The number of maternity cases conducted during the year is most satisfactory.

Mrs. Grace Stephens continues in charge of the Hospital and is assisted by Miss Endora Chislett, M.D., Miss Jervis, L. M. & S. and Sub-Assistant Surgeon Mrs. Wesley.

In all 35 obstetric operations were performed, those worthy of mention being of Poro's and vaginal hysterectomy.

As mentioned in my last report I am glad to say that a Department for females was opened at the Civil Hospital Ujjain on the 28th June 1913. In course of time a regular women's hospital will be erected there. Miss Theobald, Assistant Surgeon from the Calcutta Medical College, is in charge, assisted by a small staff of compounders, nurses, etc.

Forceps and podalic version were the operations worth noting."

Indore.—Major F. A. Smith, M.D., F.R.S., Residency Surgeon, Indore, very kindly furnishes the following particulars:—"The Maharani Chandravati Hospital for women is attached to the Maharaja Tukojirao Hospital. It is mainly intended for the treatment of lying-in cases and for special diseases of women. There are 12 lying-in beds and 12 beds for gynaecological cases. There are two Lady Doctors in charge of the hospital, Miss M. F. Thanawala, L. M. & S., and Mrs. Siddons (certified). Strict purdahashin ladies suffering from general complaints are at times admitted in this hospital, but most of the surgical and general cases are treated in the wards of the Maharaja Tukojirao Hospital. The out-patients are treated in the out-patient department of the Tukojirao Hospital. About 110 lying-in cases were treated in the maternity ward during the year."

Jaora.—Miss R. McVan continues in charge of the Victoria Zenana Hospital.

The increase in number of in and out-patients shows that the popularity of the hospital is growing.

There were 194 minor and 6 major operations during the year under report.

Rewah.—This report draws special attention to the increase in patients, viz., 1,439 more than that of the last year; the number of minor operations performed was 410 and 6 cases of delivery by forceps were undertaken, compared with 348 and 12, respectively, during last year; 95 patients were treated at homes.

Miscellaneous.

Baroda.—At the Victoria Ward the in-door patients treated numbered 246, against 213 the previous year. At the Jamnabai dispensary the out-door patients numbered 24,435, against 14,255 in the previous year.

The operations were 1,579. Those included 17 obstetric cases at the Victoria Ward. The two city nurses attended nearly 300 at the patients' homes. The Himatnal obstetric ward is nearly completed. There was a bad season of dengue and malaria.

Kapurthala.—The following particulars from Miss G. M. Friend-Pereira, M.D., have been forwarded by the Chief Minister to His Highness the Maharajah:—

"During the year 363 in and 28,311 out-patients were treated. The number of operations performed was 911, and the following are some selected cases: cataract 26, ineffecting 5, trichiasis 69, litholity 2, forceps 2, version 1, removal of tumours 6, cancer of vagina 2, rectum 1, dilating and curetting uterus 13, sequestrotomy for necrosis 5.

Six maternity cases were treated in the hospital, and a large number in the town and villages. There is a trained *dai*, but she has hardly any work outside the hospital. The people prefer to have a doctor in cases of difficulty or delay and for ordinary cases they are quite content with the services of the indigenous *dai*.

An assistant compounder on Rs 9 per month was sanctioned, and a Mahomedan woman engaged; but she resigned after four months and we have not been able to get another yet.

No other changes have been made in the budget or establishment."

Srinagar.—The Hon'ble Mr. S. M. Fraser, C.S.I., C.I.E., Resident in Kashmir, forwards the following reports from the Superintending Surgeon, Kashmir State Hospitals, and from Miss M. E. Franklin, Offg. Superintendent of the Zonana Hospital, Srinagar:—

"*Extract from a letter from the Superintending Surgeon*—The hospital is at present in charge of Miss Franklin, Assistant Surgeon, during the absence of the Lady Superintendent on leave. A capable and experienced successor to the late matron has been found in Miss Leydon. The completion of the staff quarters is satisfactory, and it is hoped that funds will be provided in the ensuing year for the erection of a separate out-patient department, which is now the chief need of this otherwise satisfactorily sound and administered institution."

"*Report by Miss M. E. Franklin, L.M.S., Offg. Superintendent.*—The number of patients treated during the year was 702 in and 8,555 out-patients; 400 cases were treated at their homes by the hospital staff, and Pilgrim women on their way from Central Asia to Mecca were vaccinated.

There were 72 maternity cases treated in their homes, and 36 in hospital, most of the latter being abnormal.

Of the total number of patients, the pardah women numbered 335 and 3,177 in the in-door and out-door departments respectively.

Surgical operations numbered 929 during the year.

Regarding changes in staff, Miss Lauder, M.D., the Superintendent, is on 6 months' leave in England. Mrs. Rogers, the matron, was invalided and Miss Leydon appointed in her place. Miss Brady was appointed on trial for 6 months as probationer nurse in place of Miss Stephens, the staff nurse, who resigned in May 1913.

Staff quarters have been erected by the State at a cost of Rs 2,212, and a block of *dais'* quarters, consisting of 8 rooms, is under construction."

Rajkot.—The number of out-patients treated in the Rasulkhanji Hospital during the year under report was 1,913, against 1,909 last year.

The number of in-patients treated was 215, against 227.

Miss A. Pinto, House Surgeon, resigned during the year and Miss M. Macedo was appointed in her place.

No other changes have been made in the working of the hospital.

Patinla.—Miss P. Cama, M.D., writes:—"Miss M. I. Balfour, M.D., resigned on the 22nd June 1913 and Miss Fernandez, L.M. & S., carried on the work till I took over charge from the 25th July 1913.

Several changes have taken place in the post of matron to the Lady Curzon School during the year. Mrs. Highfield was succeeded by Miss Stoddart, and the latter by Miss Hixon. In order to give the matron of Lady Curzon School more time to train and teach the *dais*, a second matron to look after the cleanliness of the hospital and the food of the patients was engaged during the year.

In the year now ended, 499 in and 6,742 out-patients have been treated in the Lady Dufferin Hospital and 6,323 out-patients in the Hendley Women's Dispensary; 515 operations were performed, of which 131 were major; a few of the selected operations were: ovariectomy, forceps, versions, colpo-perineal plastic operation for vesico-vaginal fistula cesarian section and removal of tumours.

The classes in the Lady Curzon School have been continued, 8 *dais* out of 12 at the beginning of the year having been examined and 5 having passed; at present 10 *dais* are undergoing training.

A class for training compounders was opened during the year as great difficulty has been experienced in procuring a female compounder. At present there are 4 compounders in training, two being native Christians, one Hindu and one Mohamedan. The reading class is under Mrs. Bala Singh, who is the teacher on the school staff. There are six pupils on the roll, two of whom are reading English and four Roman Urdu."

Bahnawalpur.—Miss Z. E. DaCosta, L.N.C.P. & S., writes in regard to the Jubilee Women's Hospital:—"The much needed additional staff has not been sanctioned yet, though the work in every branch has increased considerably. The staff consists of 2 compounders, 2 *dais* (nurses) and 2 pupil *dais*. They have worked very well throughout the year.

The in-door patients numbered 379 new. The out-door patients numbered 12,131 new, or new and old 32,006; 805 were treated at their homes. There were 28 maternity cases treated and 555 minor and 202 major operations performed."

Nahan.—The following report has been received from the Chief Medical Officer, Sirmoor State:—"The Lady Dootor, Miss A. Singha, has again done most excellent work as shown by the returns.

His Highness' kind and practical interest in the hospital and its work has had a most beneficent effect on the inhabitants of Nahan, as they have attended in increased numbers."

Jhind.—There was an increase of 1,612 patients as compared with previous year, the respective figures being 7,232 and 5,620. Thirty-three cases were treated at homes. Altogether, the hospital has considerably increased in efficiency.

Darbhanga.—There were 58,382 out-door patients this year, against 41,287 last year.

The total number of in-door patients and patients treated at homes amounted to 601 and 94, against 590 and 129 in the previous year.

The Victoria Memorial Scholarships Fund.

EXECUTIVE COMMITTEE.

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- Berar—Honorary Secretary, Dufferin Fund, Amraoti
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- Bihar and Orissa—Inspector-General of Civil Hospitals, Ranchi
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- Gwalior—Medical Officer to H. H. the Maharaja.
- Hathwa—Manager, Hathwa Raj
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- Junagadh (Rajkot)—Political Agent, Kathiawar.
- Kashmir—Superintendent, Zenana Hospital, Srinagar.
- Mysore—Residency Surgeon.
- Punjab—Inspector-General of Civil Hospitals.
- Rajputana—Residency Surgeon and C. M. O.
- United Provinces—Inspector-General of Civil Hospitals.

The Victoria Memorial Scholarships Fund.

Rules and Regulations.

1. The sums raised in furtherance of the above object shall constitute the Victoria Memorial Scholarships Fund, shall be kept separate from the present investment of the Countess of Dufferin's Fund proper, and interest accruing therefrom shall be exclusively used for the object for which Lady Curzon instituted the said Fund.

2. An Executive Committee shall be appointed by the Central Committee and charged with its direct management, and this Committee shall consist of—

- (1) the Lady President ;
- (2) the Director-General, Indian Medical Service ;
- (3) a member nominated by the Central Committee ;
- (4) the Honorary Secretary, Central Committee, Countess of Dufferin's Fund.

3. For the local administration of the Fund there shall be formed a Local Committee in each centre of operations, consisting of—

- (a) the Civil Surgeon of the district,
- (b) the wife of a senior Civilian, and
- (c) a Secretary selected by the other two members.

The Local Committee shall in each instance be in direct communication with, and immediately responsible to, the local Inspector-General of Civil Hospitals or Administrative Medical Officer, who shall be guided by such instructions as the Executive Committee may think fit to issue.

4. The Executive Committee shall issue the necessary formal instructions to the Provincial and Local Branches, it being distinctly understood—

- (a) that the interest of the subscriptions shall be, as far as possible, expended in the districts whence they have been received, and
- (b) that in all cases the *dais* shall be instructed in hospitals, training schools and dispensaries lying nearest to the localities in which they will ultimately be engaged.

5. The said Fund may be utilized not only for the provision of scholarships, but also for the payment of teachers, provision of models, books and such incidental expenses as the Executive Committee may consider to fall within the objects of the Fund.

6. The Executive Committee may call for special reports from the Local Branches regarding their administration of the said Fund, and the results shall be shown in a separate section of the ordinary annual report issued by the National Association for Supplying Female Medical Aid to the Women of India.

The Victoria Memorial Scholarships Fund.

THE main objects of the Victoria Memorial Scholarships Fund, initiated by the late Lady Curzon in 1901-02, with the object of keeping in perpetual remembrance the sympathetic interest taken by the late Queen-Empress in the domestic troubles of the women of India, have already been duly explained in previous reports; and before giving a summary of the work accomplished in 1913, and in order that there may be as little misconception as possible about the scheme, the Committee thinks it advisable to again repeat what has already appeared in previous reports regarding the definite nature of the Fund.

The general object of improving the treatment of childbirth in India can be approached on two lines, which admit of being followed concurrently and which react on each other—

- (1) to train up midwives of a superior class;
- (2) to endeavour to impart a certain amount of practical knowledge to the indigenous midwives (*dais*).

The former course, which is that followed in the main by the Dufferin Fund, presupposes a certain standard of education among the women who are trained. They must be able to read and write, and be capable of understanding lectures and studying simple text-books. It is, therefore, out of the question, until the number of educated women in India has very greatly increased, that the number of highly trained midwives should be anything but infinitesimally small in relation to the demand for their services. Such midwives, moreover, receive relatively large salaries and charge high fees; most of them belong to classes more or less out of touch with the customs and traditions of the people, and their sphere of action is limited by these considerations. Lady Curzon therefore decided that the proceeds of her appeal should be devoted to carrying out as far as possible the second of the two courses mentioned above. This she believed to be an entirely new departure. It proceeds on the principle of making the best of actual facts and existing agencies, thus endeavouring gradually to improve them. The general idea is to get hold of as many as possible of the *indigenous hereditary midwives* and induce them to attend at Dufferin Hospitals, or at the female divisions of ordinary hospitals or dispensaries, for the purpose of acquiring such empirical knowledge as it is possible to impart to them. In comparison with the training of the regular midwife class, the amount of

such knowledge will be very small ; but the women themselves, or some of them, would start with a certain practical acquaintance with the subject and will probably learn quickly. Even if at first only negative results are obtained, and the trained women merely abandon or discourage insanitary practices, the gain will be great. In time they will learn more, and whatever they learn will spread over a far wider area than can be reached by means of the superior class of midwives. The teaching will at first be oral, and will be conveyed in the colloquial language familiar to the pupils. And in order that this should be carried into effect, short and simple primers of midwifery practice in the various vernaculars have been prepared for the use of *daïs*. In many of the classes reading and writing are being taught to enable the pupils to refer to these books. Most of the teaching will be committed to memory, and will tend to popularise the improved methods which will be taught to the *daïs*.

In order to give effect to these principles, the objects of the Fund have now been defined to be—

- (1) To train midwives in the female wards of hospital and female training schools in such a manner as will enable them to carry on their hereditary calling in harmony with the religious feelings of the people, and gradually to improve their traditional methods in the light of modern sanitation and medical knowledge.
- (2) Scholarships to midwives will vary according to circumstances and locality.
- (3) When desirable qualified female teachers, who understand the vernacular, will be sent to outlying districts, and fees will be paid to midwives who attend a course of elementary instruction.
- (4) Funds for the above purpose will be granted, as far as possible, according to the interest received on the sums raised in each locality.

As long ago as the fourth century, *A. D.*, India possessed in the *Susruta Samhita*, a treatise on midwifery which a well-known specialist describes as a "thoroughly rational system of medico-surgical teaching based upon accurate observation of nature." The same writer refers to the barbarous character of the modern treatment of childbirth in India, and observes :—
 "The degradation of the art of midwifery among the Indians to so low a stage must be ascribed in part to the caste prejudices of the people." The proposals sketched above are, in effect, a revival of the most ancient tradition

and practice in India, and as such have received enthusiastic support from all patriotic Indians. Although the Fund was only started twelve years ago, the Committee is glad to report that its aims and objects are evidently warmly appreciated throughout the country by Indians of all classes.

As has been stated in reports for previous years, considering the comparatively short time that efforts have been made for the better training of the indigenous *daïs*, the Committee has no reason to be discouraged at the limited success which has attended its efforts in certain parts of the country. The difficulties with which it has to contend continue practically unchanged from year to year, and extraordinary superstitions, caste prejudices and ignorance have all to be overcome in carrying out the objects of the scheme.

The reports for the past ten or eleven years have indeed all borne testimony to the extraordinary difficulties which exist with regard to the training of the hereditary *daïs*, as well as that of the ordinary midwife.

The extracts from the district reports which are set forth below are published in the hope that the suggestions and difficulties which are alluded to therein may prove of value and assistance to some of those who are engaged in furthering the objects of the Fund.

It has to be remembered that only a very small percentage of Indian women are to-day able to read or write, and all the reports state that the general ignorance of the women who attend the classes in various parts of the country is the main stumbling-block which has to be overcome.

In the Quinquennial Report on Education in India which has just been issued by the Hon'ble Mr. H. Sharp, C.I.E., the following remarks appear:—"All efforts to promote female education have hitherto encountered peculiar difficulties. These difficulties arise chiefly from the customs of the people themselves."

"In Bombay," the Report continues, "the great mass of Indian womanhood remains almost untouched, and apparently almost inaccessible."

In view of these facts, the Central Committee feels that any advance in teaching a particularly illiterate and prejudiced class is a matter of considerable congratulation.

In some parts of India ladies of the highest family still prefer the methods of the hereditary *daï* to those of the qualified Lady Doctor, and the fear of losing their practice still prevents many of the ignorant *daïs* from accepting scholarships, and from attending classes where they have opportunities of learning modern ideas. Some *daïs* indeed consider themselves as more than proficient and regard any offer of teaching in the nature of an insult, while others oppose all European principles, and obstruct the Lady Doctors who

would improve their knowledge in every possible way. Moreover, there is no doubt that cases do occur in which *dais* after having been paid to attend regular courses of instruction have subsequently reverted to their old practices, as they have found that their patients have disapproved of improved methods. One recent report stated that the trained *dais* were unpopular because they washed their hands in soap and water instead of mud and water !

The actual period during which women should be retained in classes for study varies largely throughout the country. The Executive Committee for various reasons has not deemed it wise to prescribe any uniform period of instruction, and provincial and local centres use their own discretion in issuing rules on this subject. While some classes are held for three months, others continue for three years.

The value of scholarships offered to women as inducements to attend classes also varies in a somewhat remarkable manner, and this question is also left to the discretion of local Committees.

In certain cases, moreover, where it is found impossible to attract the indigenous *dai* the Executive Committee have consented to funds being expended on the training of a better class of women in the hope that her more ignorant sister may be tempted by the educated women's success to avail herself later on of the benefits which are held out to her. But wherever the indigenous *dai* can be induced to undergo a course of training the funds are invariably spent for her benefit.

The special elementary "Manual of Midwifery" for the use of midwives in receipt of scholarships from the Victoria Memorial Scholarships Fund, which was compiled at Lady Curzon's desire by Lt.-Col. C. P. Lukis, M.B., I.M.S. (now Director-General of the Indian Medical Service), continues to be found of considerable service. The book which contains an introduction by Surgeon-General Sir B. Franklin, K.C.I.E., is published by Messrs. Thacker, Spink & Co. Many hundreds of copies have been distributed to a large number of centres and schools of instruction, and arrangements have been made for its translation into the vernacular of the various districts engaged in the teaching of midwives. It has already been translated and published in Urdu, Hindi, Gujarati, Marathi and Bengali, while its translation into Tamil, Telegu, Malayalam and Burmese has been arranged by the provincial centres concerned. An illustrated edition in Kanarese at the expense of the Mysore Government, and another in Roman Urdu by the Patiala State, have recently been issued. Applications for copies of this manual in English, Urdu, Marathi, or Gujarati should be made to the Secretary, Viceroy's Camp.

The financial statement appended to this report shows the income and expenditure of the Fund for the year under review.* The year opened with a credit balance of Rs122-12-8, and closed with a credit balance of Rs12,636-4-7.

The interest on investments during the year amounted to Rs38,434.

During the year certain investments at 4 and 4½ per cent. were disposed of for Rs3,15,810 and the sum was utilised in meeting a loan of Rs4 lakhs to a Court of Wards' Estate at 6 per cent. per annum.

The expenditure on grants-in-aid towards the objects of the Fund was Rs26,607, and the working expenses Rs3,532.

The reports of the local centres, while pointing to very slow progress in several directions, contain as usual a number of encouraging remarks regarding the general advance of the work.

Success is attending the endeavours made in Assam in opening classes for *dais*.

In Bengal the results attained on the whole, particularly at the Dacca Centre, are most satisfactory.

In Bihar and Orissa, the persevering efforts in securing a firm footing throughout the Province, and in extending operations are praiseworthy and fully appreciated.

The relaxation of the rules for training women who are not indigenous *dais* is noticeable in the Berar Centre; and this relaxation has also been recently allowed at Lahore in the Punjab, where there are already indications of good results.

The Simla report states that trained women have been the means of rendering aid to the unfortunate women living miles from medical aid in the neighbouring hills.

All the reports from the United Provinces Centres are encouraging, and no efforts are spared to induce the indigenous *dais* to undergo training in the hospitals.

At Cawnpore trained *dais* are said to be gaining the confidence of the people rich and poor, and as they get known it is believed the ordinary bazar *dai* will have little scope for work and will cease to exist.

At Allahabad the Municipal Board provide passed *dais* from the hospital free of charge for the poor inhabitants of the city.

In Bhopal, Her Highness the Begum takes the keenest personal interest in the work of training indigenous *dais*, and Her Highness now contemplates the employment of diplomated midwives or trained nurses as itinerant teachers to establish and instruct classes on the spot in the various tahsils and

district towns of the State. Her Highness's desire is that the *dais* throughout the State shall receive thorough instructions in midwifery on modern European principles, that is, be fully equipped both in theory and practice, besides having a full knowledge of the most scientific and antiseptic methods. No less than 1,607 cases were attended by trained *dais* in Bhopal City during the year.

It is gratifying to notice also the keen interest taken by His Highness the Maharajah in improving the status of the indigenous *dais* in Kashmir by the appointment of a Lady Doctor, and erection of a Women's hospital at Jammu and by the award of five additional scholarships for *dais*.

At Hyderabad trained *dais* attended 992 cases and public confidence in their methods is steadily growing; and at Gwalior the satisfactory work of former years has been fully maintained.

The encouraging progress made in more than one Native State is highly gratifying to the Committee.

The following brief extracts from the reports which have been received from the various Districts and Native States, where branches of the Victoria Memorial Scholarships Fund have been established, indicate some of the difficulties with which the local Committees are faced, as well as the progress which has been made during the last twelve months.

Assam.

The Honorary Secretary, Assam Branch, reports:—"A scheme for the training of indigenous *dais* at selected centres in the province is being worked out. After the close of the year, a Midwifery class was opened at the Berry-White Medical School, Dibrugarh, with 2 Naga girls, a coolie girl from a Tea Estate, and 9 local *dais*.

Major Coppinger, who has taken considerable interest in the scheme, states that there are 9 other local *dais* willing to join the class, and his proposal of encouraging their attendance by the grant of a small fee is now before the Committee. At Kohima, a similar class was started with 3 Naga girls, of whom 2 have been granted a monthly stipend of Rs12 each and sent to the school at Dibrugarh for instruction."

Baluchistan.

The Residency Surgeon and Chief Medical Officer in Baluchistan forwards the following reports regarding Quetta and Sibi:—

Quetta.—Miss E. M. Cardozo states that—

"Since the formation of the *dai* class in 1907, five *dais* have been trained and three are being trained.

Of the trained *dais*, Louisa is working amongst the Zenana women in the city and has a very good practice; Rebecca is on the staff of the Dufferin Hospital and is sent out to midwifery cases in the bazaars; she is

very popular and capable and takes a keen interest in her cases ; and Mompta is working in the Women's wards of the Mission male hospital and is gaining experience and assurance under Miss Manwaring ; Bhagberry is in the Punjab, her husband having obtained an appointment there she had to accompany him ; Ulfuth has been the least satisfactory of the passed *daïs*. She gained honours, and when in the mood, worked with intelligence and care. I have lost sight of her for several months.

Of those under training, Deborah will have completed her two years at the end of December. She is excellent in book knowledge and knows her practical work ; but on account of ill-health is lacking in energy ; Raimuth has to undergo eight months' more training, and has nearly committed to memory her Midwifery and Nursing Primers. She is practical and methodical. I expect her to pass with distinction ; Sarah joined a month after Raimuth ; she is somewhat elderly and is dull and forgetful. She is, however, very sympathetic and is loved by her patients. I hope she will be able, at the end of her two years, to remember enough theory to pass her examination."

Subi.—Miss A. Alfred, L.M.S., reports as follows :—" Nine *daïs* have been trained in this hospital since the opening of the branch. Out of these, seven went up for the examination, and six passed out successfully. Two others could not continue their studies owing to some personal troubles.

All the *daïs*, with the exception of one, are working in various places, and they are well employed by the people. Two *daïs* are under training at present, but none of them belong to the indigenous *daï* class, as it is difficult to get them or others even in this part of the country.

People here have begun to appreciate the services of a trained *daï*, as they come to hospital to ask for them, and the women themselves like to engage those putting on clean clothes to attend them. One of the *daïs* who had a year's training here and had to leave, is much more engaged by the people of the city than the local *daïs*, owing to her cleanly habits and better methods."

The Hon'ble Colonel G. F. A. Harris, C.S.I., M.D., I.M.S., Inspector-General of Civil Hospitals, Bengal, furnishes the following notes :—
" There were 3 classes in operation during the year under report against 4 in the previous year, besides the class at the Calcutta Dufferin Hospital, the increase being due to the re-opening of the class at Birbhum which was temporarily closed in 1912. The places where classes were in operation are

(1) Birbhum, (2) Bankura, (3) Hooghly, (4) Darjeeling and (5) Dacca. A short account of the working of each of these classes is given below :—

Birbhum.—The class was re-opened on the 17th July 1913, and 4 pupils are now under training. None passed during the year under report as the time was short. A sum of ₹130-3-0 was received from other sources for its maintenance.

Bankura.—The tuition of the pupils is conducted by the Lady Doctor attached to the Lady Dufferin Zenana Hospital. Two pupils were taught during the year, but none of them passed the examination held under the supervision of the Civil Surgeon. The services of trained *dais* are gradually being appreciated by the general public of the district and one passed *dai* has been provided with an appointment in one of the hospitals in the district. As is the case in many other places, pupils from the indigenous *dai* class are not easily available here although the District Board has offered a higher rate of stipend, *viz.*, ₹6, against the former rate of ₹4 per mensem to attract pupils.

Hooghly.—In the year under report 6 pupil *dais* were admitted, but 3 of them left the class without completing their course of training. None passed. There are at present 4 pupils attending the class who are being taught by the Lady Doctor in Midwifery. They are also trained in sick nursing by the European Nursing staff of the Inambara Hospital, Hooghly. A sum of ₹400 was allotted from the Victoria Memorial Scholarships Fund grant at my disposal to this class, *viz.*, ₹300, for stipends to pupils and ₹100 for purchase of models and diagrams. The local municipality, and the District Board paid ₹148-11-0 and ₹139-6-3, respectively, towards the maintenance of the class.

Darjeeling.—In Darjeeling, 4 pupils were under training at the cost of the Victoria Memorial Scholarships Fund, and 4 others at the expense of Local Funds. Two of them left the class without completing their course, 2 passed the examination creditably, 1 appeared at the examination but failed and has been detained for another 6 months, and the remaining 3 are still under training. A sum of ₹376 was allotted from the Victoria Memorial Scholarships Fund to this class, *viz.*, ₹360 for stipends and ₹16 for reward to a successful *dai*. The receipts from other sources (Local Funds) amounted to ₹189-10-9.

Dacca.—Seven pupils passed out of this class, and 9 are still under training. Its expenditure was met entirely from the contributions received from the District Board, Municipality, and other local funds which amounted to ₹451.

It will be seen that the *dai* class at Dacca stands first both in respect of the number of passes and of those under training, and may be considered to be the foremost of the *dai* classes in this Presidency.

The total contribution received during the year under report from the Central Committee of the Victoria Memorial Scholarships Fund amounted to Rs. 2,212."

The annual report submitted by Colonel F. J. Drury, M.B., I.M.S., Inspector-General of Civil Hospitals, Bihar and Orissa, continues to give hope of increased activity in this Centre in the future. He states :—"The progress of the Victoria Memorial Scholarships Fund in this Province during the year under report has been satisfactory. In addition to the five *dai* classes existing in 1912, viz., those at Gaya, Bankipur, Arrah, Hathwa and Cuttack, four more classes were formed besides the class at Purulia which was opened at the end of 1912. There were thus ten *dai* classes in operation during 1913 for the training of indigenous midwives against five in 1912. Of the five new classes at work in 1913, those at Chapra and Bettiah are altogether new ones. The remaining three classes (at Purulia, Darbhanga, and Daltonganj) which had been previously formed had been closed for want of pupils, but reopened during the year under review.

Bihar and Orissa.

It is hoped that more new classes will soon be opened at Hazaribagh and at Motihari in Champaran. The attempts to get together a class for *dai* pupils at Ranchi have so far been fruitless. I still hope that the efforts of the Civil Surgeons will be successful in the end. The difficulties in the way of establishing and keeping up *dai* classes exist as before. The ignorance and the caste prejudices among the class of women from whom the *dai* pupils are recruited are the main obstacles which have to be overcome. The Lady Doctor now in charge of the Dufferin Hospital at Darbhanga, Mrs. L. Robinson, reports that it was only with the utmost difficulty that the class at Darbhanga was maintained. These obstacles may be removed or diminished in course of time and by the steady efforts of Civil Surgeons who are doing their best. Some of these officers do not seem to be very sanguine of success, but my belief is that perseverance in the matter will lead to better results, and I have requested Civil Surgeons to maintain their efforts in this direction.

The most successful of the *dai* classes in this Province are those at Hathwa and Cuttack. The classes at Bankipur and Gaya are also doing good work.

The total number of *dais* trained during the year under report was 18 against 11 in 1912. The number of passed *dais* in this Province in

date is now 210. The Lady Doctors attached to the Cuttack General Hospital and the Gaya Pilgrim Hospital—Miss Prabhabati Sinha and Miss A. V. Hector—were given awards in cash in recognition of the good services rendered by them in this respect. The following Assistant Surgeons and Lady Doctors also deserve thanks for the interest they have taken in the matter :— Assistant Surgeon A. K. Mukherji of Hathwa Victoria Hospital, Assistant Surgeon Chandra Kanta Chakrabatti of the Chapra Hospital and Lady Doctor Miss Mukherji of the Dufferin Hospital, Darbhanga, and her *locum tenens* Mrs. L. Robinson.

The total receipts of the *dai* classes during the year amounted to R2,152-5-3 against R2,106-5-0 during 1912. Of this sum, R1,193 was given from the Victoria Memorial Scholarships Fund placed at my disposal by the Central Committee of the Fund."

Burma.

The report from this Centre states that 56 midwives have been trained to date; that 10 passed in 1913 and that 5 Burmese, 2 Karens, 1 Arrakanese and 1 Kachin were under training at the close of the year.

Berar.

The following report has been received from the Honorary Secretary of the Berar Centre :—"The relaxation of the rules about training strictly hereditary *dais* has resulted in the training class being filled this year. Six pupils entered the class in March 1913, and remained under training at the end of the year under report.

The sum of R625 was received from the Central Committee during the year and R615-15-1 were expended.

A brief report on the training of *dais* at Amraoti together with the amounts of receipts and expenditure is given, and a copy of Miss Keess' report is also appended."

Miss J. Keess, L.M.S., reports :—"As the hereditary *dais* or their relations have not offered themselves this year for training, 6 pupils of a better class are being trained as midwives : 4 Hindus, 1 Maratta and 1 Dher.

The class was opened on the 1st March 1913, and each pupil gets a scholarship of R7 a month. They can all read and write Marathi and are fairly intelligent. They have all conducted normal labour cases under the supervision of the Lady Doctor and midwife Mongabai.

Private practitioners of the town have often asked me for their services and I have sent them out. They have given every satisfaction and will appear for their examination next February."

Central
Provinces.

Rai Bahadur N. G. Sarkar, the Honorary Secretary of the Centre, summarises the progress thus :—"During the year under report, a class for the training of indigenous *dais* was held at the Jubbulpore Centre only.

The Lady Doctor in charge of the Elgin hospital, Jubbulpore, reports that the two pupils under training last year have passed their examination and that a fresh class of three pupils has been started.

From a recent communication received from the Inspector-General of Civil Hospitals, Central Provinces, it appears that two Missionary Ladies, Miss Henderson of Nagpur and Miss Lungley of Jubbulpore, have expressed their willingness to further the objects of the Fund. The question of granting pecuniary assistance to the ladies for this purpose is under the consideration of the Provincial Committee."

The Honorary Secretary reports :—Ten midwifery pupils are now undergoing training : four at the Government Maternity Hospital and six at the Raja Sir Ramaswami Mudaliyar's Maternity Hospital. Madras.

The training of midwives was commenced in 1887 and since then 161 have passed out. Of these, 106 were employed by local bodies after completing their training. No reliable information concerning the remainder is available, but no doubt some of them are doing useful work in remote villages of the Presidency.

No difficulty has been experienced in obtaining pupils for these classes, and in addition to those stipended by the Fund, a number of pupils are undergoing training at many of the hospitals in the mufassal. Those stipended by the Fund receive Rs per mensem. During the year ten pupils have passed out successfully, and of these four have found employment under local bodies, the others engaging in private practice at various Centres.

The report of Colonel C. J. Bamber, I.M.S., Inspector-General of Civil Hospitals, Punjab, is as follows :—"During the year 1913, classes for the training of *dais*, under the auspices of the Victoria Memorial Scholarships Fund, were carried on at Lahore, Ambala, Ferozapore, Simla and Ludhiana. No classes were held at Rawalpindi and Amritsar. Punjab.

Ferozapore.—Good work continues to be done at Ferozapore. Two classes have been held regularly : one in English and the other in Vernacular. In March last, two candidates appeared for the Lahore examination both of whom were successful. Two others who had taken the nine months' course were examined by the Civil Surgeon and successfully passed the test. It is, however, a matter of regret that more indigenous *dais* do not come forward for training, since it is for the benefit of this class of women that the Fund was inaugurated, and the fact that only one such woman joined the class, and that only last month, is not very gratifying. The prejudice against the *dai* trained under European methods is gradually breaking down and there is now an increasingly large number of people who are willing to call in European Lady Doctors and their proteges without hesitation.

Ambala.—Systematic work continues to be done at Ambala. Five *dais* are under training including one who failed to pass her examination last year. Four of these are now ready for their local examination: all of them are hereditary *dais* conducting no less than 40 cases each annually.

Ludhiana.—At Ludhiana classes were held regularly, the teaching being given by the Principal of the Women's Christian Medical College assisted by Dr. Ethel Maya Das, and two other certificated students. Twenty-three women under the auspices of the Fund are at present under training, and 22 indigenous *dais* have been in training during the year under report.

Twelve of the Fund *dais* and five of the indigenous class presented themselves at the Lahore *dais'* examination, all of whom were successful. The difficulty in persuading these women to show their cases in the city, as pointed out by Dr. Brown last year, is as great as ever; but as long as the people object to outside interference this difficulty will remain.

Simla.—There has not been much improvement at Simla since the last report was written, and only a class of three *dais* was started in December last. One out of these left after a few months, the remaining two continued and have completed their course of study. Two lectures weekly were delivered on Midwifery, but on account of the extreme ignorance of the women more time had to be devoted by the Lady Doctor to make things clear to them. Dr. Battersby spares no pains to make these women as far as possible proficient in their calling. It is satisfactory to note that these women have been the means of preventing some suffering and of rendering aid to the unfortunate women living miles away from medical aid in the neighbouring hills. It is also satisfactory to find that the untrained *dai* is fast being supplanted by her more advanced sister, and the fact that during the year under report only a very few cases had to be admitted into the hospital for operation, speaks greatly for the work which the Fund is doing.

Lahore.—At Lahore the difficulty of securing *dais* of the indigenous class has not been got over, and for this reason only recently the Executive Committee of the Fund consented to the admittance of women of a more advanced and literate class to the benefits of the Fund on the understanding that *dais* of the indigenous class were not forthcoming. Already two women have been recommended and accepted. At present there is only one *dai* being trained under the auspices of the Fund."

The Hon'ble Colonel C. C. Mainfold, M.B., I.M.S., Inspector-General of Civil Hospitals, United Provinces, submits the following statement:—

Allahabad.—Report by Miss M. Drummond, Dufferin Hospital.—"In the beginning of the year, there were two *dais*, Nehar and Saidul. Nehar who is a very promising and intelligent pupil, will go up for her

examination on 8th February 1914. Saidul completed her course, passed the examination on the 15th of September 1913, and obtained an appointment at Rs 25 per month in the State of His Highness the Maharaja of Benares. Josodia was appointed in place of Saidul.

Considerable efforts are being made to induce indigenous *dais* to attend the hospital for lessons on cleanliness and the management of labour cases, and no less than 29 *dais* have been trained to carry on their business amongst the poor people. The Municipal Board of Allahabad have also appointed in their different wards passed *dais* from the hospital, free of charge, to work amongst the poor inhabitants in the city. If all the local bazar *dais* who are now practising in the city, were to attend the hospital to obtain the first lesson in labour cases, as many of them have been induced to do, the object of the Victoria Memorial Scholarships Fund will be realized."

Lucknow.—Report by Mrs. E. Hutton, L.F.P.S., L.N.C.P. & S:—"At the beginning of the year there were three Victoria Memorial Scholarship *dais* under training. Of these, one has completed her training and passed her examination successfully. Her place has been taken by another woman. One other *dai* was dismissed for misconduct, and her substitute was also dismissed.

The *dais* at present under training are all Mohamedan women, fairly intelligent and work satisfactorily."

Cawnpore.—Report by Miss F. Leach, M.D., Dufferin Hospital:—"The progress and work of the two Memorial *dais* under training during the past year has been satisfactory. They have passed this year after a two years' course. They are intelligent, bright and painstaking, and have shown a keen interest throughout their training. They have conducted several labour cases in the hospital and in the city, and have given satisfaction to the patients and their friends. I am confident that should they meet with any difficulty or abnormality in labour cases, they would send for proper skilled help in time.

I am glad to be able to report more favourably on the progress, development and services of trained Victoria Memorial *dais* practising in Cawnpore. At the beginning there was much to discourage and dishearten those who had to carry out the scheme, and at times it seemed hopeless from the many failures of *dais* who would undertake the training for a time, but not complete it. We have, however, after many years of patient work secured six competent good character women who have undertaken the training and are now rendering excellent service.

Owing to caste and other Indian rites and customs, most of these trained *dais* have absolutely refused to accept posts out of the station or practise privately away from the hospital. They assure me that for the above reasons they prefer being attached to a hospital and being in touch with the Lady Doctor. In this way they can pacify their caste friends and relations, and moreover secure a considerable amount of protection and respect from the public which they could not command if practising privately themselves. We have four Victoria Memorial trained *dais* who, though on the Dufferin Hospital staff, are permitted to undertake obstetric cases in private homes whenever asked for. During the past two years these trained *dais* have had a very fair amount of practice in the city, and are gradually gaining the confidence of the people, rich and poor. I have reason to believe that as the work grows, and the services of these trained *dais* get known, the ordinary ignorant bazar indigenous *dai* will have very little scope for work and will cease to exist."

Agra.—The report by Major E. J. O'Meara, Civil Surgeon and Principal of the Medical School, is as follows :—"The following *dais* were under training at the close of the previous year :—Champa A., Munnie, Bhagwati, Sundarrihtra, Munnie, Bhagwati C. G., Rayvethi, Kalawathi, Javethri and Chironji.

Of these, Bhagwati left the class in January, and Kalawathi was dismissed in February. Bhagwati C. G. and Sundarrihtra passed their examination very creditably in March, and the latter has also been since employed in the Maternity hospital for six months. Rayvethi was sent up for her examination last month but failed. There are 6 *dais* now in the class continuing from last year. The class at present numbers 13. There have been 8 admissions during the year, two of whom are *dais* who left previously and were re-admitted. Champa A. and Munnie have forfeited their scholarships, as they are over two years in the class; they will be ready for their examination in two months. Rajdei, one of the new admissions, is attending without a scholarship, on condition that one is given her on the first vacancy. All the *dais* under training are indigenous and with the exception of one (a Rajput) are of the Dhanok caste.

During the year, 843 cases were conducted by the *dais* against 754 last year. The progress of the class is satisfactory, and there has been an increase of 89 over the total number of cases treated last year.

The expenditure incurred during the year was Rs2,182-9-8, and the Fund has a balance of Rs1,429-9-6."

Benares.—Report by Miss D. E. Pratt, M.D.:—"Three women were under training at the opening of the year, of whom one left in a few days, and others joined later; but all had to be discharged for not obeying orders. None have qualified this year. Three are in training at present and 2 more are expected at the beginning of the new year. Hamah Dyal, a trained *dai*, was entertained on the hospital staff, her pay, Rs15, being chargeable to the Victoria Fund accounts. She was dismissed on November 12th for insubordination.

Rs430-15-6 have been received and expended in salaries for the Fund during the year."

The Agency Surgeon, Major J. W. Watson, I.M.S., forwards the following report from Mrs. F. D. Barnes, M.D., the Lady Doctor in charge of the Lady Lansdowne Hospital:—"Out of the class of 29 city and 10 district *dais*, making a total of 39 pupils, 29 were successful in the final examination, the Agency Surgeon, Lieutenant-Colonel Haig, I.M.S., being very careful not to pass any woman who did not prove herself highly efficient. Bhopal

The class of 29 city *dais* represents now the last of the indigenous *dais* of the City of Bhopal. None now remain undiplomaed. The ten village *dais* were very successful and gave every satisfaction in their work in the hospital, and we are endeavouring our best to get more of these village women into Bhopal to be trained. The vast field of recruitment will be made clear when I explain that there are 4,000 villages in Her Highness's State, and at least one trained woman will be required for each village. This will necessarily take some time to accomplish, and I hope that Her Highness will allow my plan, *viz.*, of getting every woman into Bhopal to be trained in the hospital, to have effect. Her Highness's idea is to send out two or three trained itinerant Medical workers to certain centres to give the women their training, but the experience gained in an Institution like the Lady Lansdowne Hospital is in my opinion of far greater value to the women themselves.

The class of indigenous *dais* conducted 1,607 labour cases in the city during the year under consideration. The returns of the village *dais* have not yet been submitted.

A very much larger number of cases have been brought in by the *dais* into hospital, all being abnormal ones requiring surgical interference."

The Chief Medical Officer of the Gondal State reports briefly "that at the beginning of December 1912, there were two female pupils under training, and during the year under report one female pupil was admitted. Their progress was fairly good. Gondal.

These under training during the year conducted on an average 43 cases of labour under the guidance of the head *dai* of the Gondal Hospital."

The *dais* sent out from this Centre are doing good work.

Gwalior.

The following is the report of the Chief Medical Officer and Sanitary Commissioner, Gwalior State :—"There are two classes held at present, one at the Jaya-Arogya Hospital, Lashkar, and the other at the Civil Hospital Ujjain. Sixty-one *dais* have passed from the Jaya-Arogya Hospital, and 18 are under training. Three of them having finished their three years' course, will be examined in January 1914. Eighteen certificated *dais* have been attached to District hospitals and dispensaries. Three trained *dais* are working as nurses in the Jaya-Arogya Hospital. About 500 cases have been attended by these *dais* and others working independently in the towns.

We find that there is a greater demand for *dais* of high caste than for those of Dhanok and Basok (the indigenous *dais*) ; but as one of the objects of the Fund is to train the latter, we always have a certain number of these under training. They are very unsatisfactory and few of them take the full course.

Hyderabad.

Lieutenant-Colonel P. J. Lumsden, M.B., I.M.S., Residency Surgeon, Hyderabad, forwards the annual report by the Senior Visiting Surgeon :—"At the beginning of December 1912, there were 4 *dais* under training and 9 admitted during the year, making a total of 13. Of these, 7 went up for their examination and passed. Diplomas will be given to them after completing their clinical study. Four are still under training, and 2 were discharged as unfit for work. In addition, 2 *dais* are under training without pay.

During the year, the *dais* attended 250 classes of lectures, and the total number of maternity cases attended was 992. Of these, 526 were natural labours, 193 abnormal, and 273 complication cases. As regards the 24 deaths which occurred during the year, the patients, with very few exceptions, were brought to the hospital in a dying state or with serious complications which had been introduced by the interference of ordinary unskilled women outside.

Public confidence in the institution is steadily growing. Bazar *dais* frequently recommend difficult labours to attend the hospital instead of, as formerly, attempting everything themselves.

Many of the passed *dais* are working in the district dispensaries. Some are practising on their own account, and all are doing well."

Indore.

The report by Major F. A. Smith, M.D., I.M.S., Honorary Secretary, runs :—"In the examination held in December 1912, 11 students out of 13

passed. The class which opened in January 1913 was formed of 20 students, and the number at the end of the year was 21.

Sethani Anupbai, wife of Rai Bahadur Seth Kasturchand, Banker of Indore, presents a silver medal to the student who passes first in the annual examination each year."

The Chief Medical Officer, Baroda State, says:—"The class which was opened in November 1911 was continued throughout the year. There were 7 candidates in the class, same as last year, but the attendance was not regular. Nurse Gajrabai Mane gave lectures and demonstrations, and also taught the *dais* practical work. A comprehensive table is given, illustrating the number of lectures delivered, and the lectures attended by each candidate. The lectures totalled from 9 to 14 each month.

The Lady Doctor inspected the class two or three times each month during the year under report. Three candidates who had completed their period of training appeared at the final examination held in June 1913 and two passed.

The sum received during the year under report was Rs700. There was a balance of Rs1,487-10-3 in the Treasury from last year. Out of the total funds, Rs598-10-6 were disbursed towards the maintenance of the *dai* class, leaving a balance of Rs1,588-15-9 now in the Treasury. The average monthly cost incurred on account of each *dai* was Rs8-5-4, against Rs8-15-4 in the preceding year."

The Hon'ble Mr. S. M. Fraser, C.S.I., C.I.E., Resident in Kashmir, forwards reports by the Superintending Surgeon, Jammu and Kashmir State Hospitals, and the officiating Lady Superintendent of the Zenana Hospital, Srinagar. The former writes:—"The extension of scholarships for indigenous *dais* in the Kashmir Province has been sanctioned, and provision is now made for the training of 10 women of this class instead of 5, together with an extra allowance for a midwife to instruct them in their practical training.

In so far as the Province of Jammu is concerned, now that a Lady Doctor has been appointed, and the erection of a Women's hospital is contemplated in Jammu, the institution of the system of training indigenous *dais* in that city may be expected, and provision for this is being included in the budget estimate for the ensuing year."

The Officiating Lady Superintendent, Zenana Hospital, Srinagar, says:—"Of the 5 *dais* under training, 3 only were considered fit for examination; these were presented in September 1913, and were all successful.

In the interests of the public, His Highness the Maharaja Sahib Bahadur has graciously sanctioned scholarships for 5 additional *dais* in the class, making the total number 10. The post of a trained midwife has also been sanctioned to accompany the pupil *dais* in the city.

There were 72 maternity cases treated in their homes and 36 in hospital."

Kathiawar.

The following brief account is submitted by Mr. J. Sladen, I.C.S., Agent to the Governor :—

The Agency Surgeon, Kathiawar, writes :—"The Dufferin Fund probationer referred to in the last year's report has completed her course and a new one is under training at the West Hospital, Rajkot, and Rasulkhanji Hospital for women.

As before, the officer in charge of the Rasulkhanji Hospital has kindly undertaken the practical midwifery part of the training, thus providing adequate obstetrical teaching. The nurse attached to the West Hospital, Rajkot, gives the necessary training in general nursing."

Mysore.

Mr. P. S. Achyuta Rao, Honorary Secretary, Mysore Centre, writes as follows :—"Out of 7 pupils, 2 passed and 5 are under training. During the year under report, only one meeting of the local committee was held on Tuesday, the 11th March 1913, at which the audit report by the Comptroller of Mysore, showing that the accounts of the Victoria Memorial Scholarship Fund for the year ending 30th November 1912 had been properly kept was read and recorded.

I proceeded on 2 months' privilege leave from 18th December 1912 to 17th February 1913, during which period Rao Saheb Dr. T. V. Armugam Mudaliar was in charge of the duties of the Honorary Secretary of the Fund."

Rajputana.

Major R. E. A. Hamilton, I.A., First Assistant Agent to the Governor-General, forwards the following report by Lt.-Col. W. H. B. Robinson, I.M.S., Chief Medical Officer :—

Ajmer.—"Mrs. Kane, Lady Superintendent, has been in charge of the *dai* training class throughout the year. The 9 pupils mentioned in the last year's report as being under instruction continued to work to the end of the session, when they were examined by the Civil Surgeon, Ajmer. They all passed and obtained their certificates, and received the usual honorarium which is given to successful candidates.

Five pupils (midwives) were admitted into the current year's class, of whom 1 came from Bharatpur, 1 from Tonk, 1 from Jodhpur and 2 from Jaipur. One has since been discharged as unlikely to prove efficient.

During the year 13 in-door and 55 out-door maternity cases were treated, and 133 persons sought advice and treatment.

Since the inauguration of the class altogether 57 pupils have passed ; of these a few are known to be working in various dispensaries in Rajputana, others are practising midwifery and doing well. Among the latter there are 13 in Ajmer, 3 at Kishangarh, 1 at Masuda, 4 at Jaipur, 4 at Jhalawar, 3 at Alwar, 4 at Beawar, 1 at Nasirabad, 7 at Udaipur, 1 at Mount Abu, 2 at Jodhpur, 2 at Shahpura and 3 at Sirohi. The remainder have been lost trace of.

As regards the funds of the Victoria Memorial Scholarships Fund, the opening balance to credit on the 30th November 1912 was R11,817-10-11, receipts R3,712, total R15,559-10-11. Of this sum, R3,435-5-8 were expended on the Ajmer *dai* class, against R3,191-5-3 in the previous year. The increase in expenditure is due to the fact that scholarships to the Native States pupils were paid at the rate of R15 per mensem each, as sanctioned by the Hon'ble the Agent to the Governor-General in 1911. The closing balance in hand on 30th November 1913 was R12,124-5-3."

Jaipur.—Two pupils from Jaipur were admitted into the Ajmer *dai* class in July 1913. They were of the indigenous *dai* caste, but one, however, was unfortunately not considered suitable. Two *daïs* are being trained in the new class at the Mayo Hospital, Jaipur, opened in 1910 : one as a probationer for the Ajmer *dai* class and the other for admission into the Sub-Assistant Surgeon class at Agra in July 1914.

The *daïs* who are trained and employed in the hospital are paid by the Jaipur State and not from the Victoria Memorial Fund.

Kotah.—The local *dai* class was started by the Lady Superintendent, Victoria Jubilee Hospital at Kotah in April 1913 with an admission of 4 *dai* pupils. All these four came from the Kotah districts. After a month's training one of them was found to be an unpromising pupil and was sent back to her home. Three continued on and, after a course of four months' training, were examined by the Agency Surgeon, Kotah and Jhalawar, passed with credit and received certificates to practise as *daïs*.

Bharatpur.—No *dai* class was started in the Women's dispensary at Bharatpur during the year, as Female Sub-Assistant Surgeon Bibi Rup Kaur in charge, resigned the service in September 1913, and the appointment is still vacant.

E J BUCK,
Secretary.

VICTORIA MEMORIAL SCHOLARSHIPS FUND

Progress of Various Branches of the Fund

Victoria Memorial Scholarships Fund.

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1913.

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.					RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1913.	From formation of branch to 30th November 1913.	Others (not included in column 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1913.		Since formation of branch to 30th November 1913.		During year ending 30th November 1913.	From formation of branch to 30th November 1913.	Balance in hand on 30th November 1913.	Average monthly cost of each pupil during training.		
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.						
1	2	3	4	5	6	7		8		9	10	11	12	13	
Bengal.															
Calcutta	Feb. 1903	6	31	5	...	R. A. P. 780 0 0	R. A. P. ...	R. A. P. 11,027 0 0	R. A. P. 645 4 2	R. A. P. 503 0 0	R. A. P. 12,555 4 2	R. A. P. 17 0 0	R. A. P. ...	No class formed during the year.	
Burdwan	16th Oct. 1906.	...	...	...	...	...	...	...	490 0 0	...	122 1 0	367 15 0	...	No class formed during the year.
Birbhum-Suri	11th June 1907.	...	9	4	1 year and longer when required.	48 0 0	130 3 0	263 0 0	803 2 3	22 6 0	647 13 0	481 4 0	2 0 0	Reopened.	
Bankura	1st Oct. 1903.	...	11	2	12 months.	...	111 12 0	200 5 6	941 10 4	111 12 0	1,134 15 10	7 0 0	5 0 0		
Midnapur	5th July 1906.	...	7	...	...	...	...	204 0 0	400 7 2	...	630 1 1	64 6 1	...	No class formed during the year.

PROGRESS OF THE VARIOUS BRANCHES OF THE FUND

100

Month.	4th Sept. 1902.	8	1 year	400 0 0	238 1 3	430 0 0	928 10 3	619 8 0	1,375 1 3	80 0 0	10 0 0	Received.
Strampur	1st July 1903	15					60 0 0	622 13 7	...	462 3 0	225 10 7	
Nada-Krath- magar.	16th Dec. 1907.	5					448 0 0			448 3 10	0 12 2	
Verhampur	31st Oct. 1905.	41					791 0 0	8 12 0		776 6 0	23 8 0	
Kand.	2nd Mar. 1900.	...					15 0 0			...		
Marahlabad	6th June 1910.	...					182 0 0			...		
Madjoling	7th April 1900.	2	11	4	1 40 15 YEAR	376 0 0	430 10 0	11,722 10 5	1,479 0 1	823 13 5	2,064 1 7	393 2 2
Barua	1902	7	48	9	1 year	451 0 0	1,402 0 0	2,109 2 1	703 3 0	3,205 15 7	14 4 6	7 0 0
Torua	18th 1900	23				1,556 0 0	1,470 11 0	17,523 0 2	9,591 6 11	3,247 10 2	24,310 0 1	1,790 14 0
Barar.												
Barar.	1st July 1902.	41	1 year	625 0 0			10,802 2 6	64 13 7	618 15 1	9,000 15 9	1,257 0 4	8 8 2
Barar.	1st July 1902.	41	1 year	625 0 0			10,802 2 6	64 13 7	618 15 1	9,000 15 9	1,257 0 4	8 8 2

No class formed during the year.

Including class trained at the Indira Hospital, Calcutta

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1913—contd.

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.				RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1913.	From formation of branch to 30th November 1913.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1913.		Since formation of branch to 30th November 1913.	During year ending 30th November 1913.	From formation of branch to 30th November 1913.	Balance in hand on 30th November 1913.	Average monthly cost of each pupil during training.		
						(a) From E. Committee.	(b) From other sources.							
1	2	3	4	5	6	7	8	9	10	11	12	13		
Bihar and Orissa.														
Bankpur	1st July 1907.	1	11	3	1 year	R. A. E. 170 13 0	R. A. E. 625 12 0	R. A. E. 1,434 5 2	R. A. E. 175 19 0	R. A. E. 1,679 0 3	R. A. E. 3 0 11	R. A. E. 6 0 0		
Gaya	6th June 1904.	2	10	2	1 year	145 0 0	200 0 0	1,151 0 0	241 5 11	2,346 1 10	101 6 2	10 2 5		
Arrah	24th April 1908.	3	7	1	1 year	232 0 0	0 0 0	1,270 0 0	232 0 0	1,260 5 7	60 12 11	7 0 0	No class formed during the year.	
Champurani (Mothari).	1st Feb. 1903.	...	10	...	...	...	...	102 0 0	402 5 0	512 1 0	...	...	No class formed during the year.
Champurani (Bettiah).	1st Jan. 1913.	...	...	4	2 years	...	50 0 0	120 0 0	80 0 0	105 11 0	1 4 0	4 15 0	New class formed.
Saran (Pathwa).	13th May 1902.	9	45	10	1 year	13 0 0	784 0 0	202 8 0	1,115 12 3	12,904 0 1	3,577 7 0	4 12 10		
Saran (Chapra).	18th Nov. 1913.	...	...	3	1 year	312 0 0	...	312 0 0	212 11 0	212 11 0	60 4 0	5 13 0	New class formed.
Muzaffarpur.	25th Oct. 1903.	...	0	...	...	...	93 0 7	150 0 0	...	403 0 0	03 13 8	...	* Interest for 1912-13. No class formed during the year.

PROGRESS OF THE VARIOUS BRANCHES OF THE FUND

111

Branch	1st Feb. 1903	11	6	144 0 0	323 8 0	629 11 0	92 14 5	901 1 0	51 1 3	4 0 0	Expend on 1st June 1913.
Monghyr	1st Nov. 1903	1	"	"	"	856 0 0	"	553 0 0	"	"	"
Dhagupur	1st Dec. 1903	8	"	"	"	506 0 0	"	608 3 0	279 12 6	"	No class formed during the year.
Purnea	1st Mar. 1908	6	"	"	"	300 0 0	"	330 11 8	14 2 4	"	No class formed during the year.
Cuttack	13th May 1900	3	4 1 year	242 0 0	100 7 5	1,554 4 0	1,232 1 2	300 0 8	2,716 4 2	63 1 0	8 0 0
Balasore	5th May 1903	15	"	"	"	"	629 3 10	629 3 10	"	"	"
Puri	1st Jan. 1903	19	"	"	"	96 0 0	252 0 0	378 0 0	"	"	"
Hazalbagh	9th June 1903	5	"	"	"	40 0 0	644 4 7	630 13 10	3 0 0	"	No class formed during the year.
Ranchi	1st April 1903	3	"	"	"	300 0 0	635 15 2	489 0 0	330 14 6	"	"
Dahongaj	1st Aug. 1902	1	1 year	"	"	150 0 0	"	122 0 0	28 0 0	"	"
Purnia	5th July 1905	3	4 1 year	85 0 0	124 7 3	517 2 0	284 6 0	428 4 3	793 2 1	3 0 0	"
Sugbhum	17th April 1906	2	"	"	"	102 0 0	102 0 0	186 7 0	73 9 0	"	"
Total	1st	210	38	1,105 0 0	1,859 12 0	7,506 11 0	25,012 2 2	3,130 13 4	4,27,475 0 4	5,133 8 10	"

Reopened on 1st July 1912.

Reopened in Dec. ember 1912

No class formed during the year.

Stations where classes are held.	Date of formation of branch.	Date ending

Stations where classes are held.	Date of formation of branch.	During year ending 30th Nov.
1	2	3
London	21st Feb. 1905.	10
TOTAL		10
1st Dec. 1904.	3	1
TOTAL	3	10

United Provinces.									
	1st Jan. 1903	14	3	3 years	430 16 6	4,501 3 3	430 15 6	4,501 3 3	About RP
Benares	1st Nov. 1902	2	12	1 year	1,740 0 0	568 2 6	12,990 0 0	1,154 10 2	1,429 9 6
Agia	Nov 1902	2	20	2 years	220 0 0	2,321 8 9	220 0 0	2,321 8 9	9 2 8
Cawnpore	20th Sep. 1902	1	8	2 years	400 10 5	1,011 6 1	3,868 10 9	2,591 10 9	14 4 5
Lucknow	Sep 1902	1	10	2 years	220 6 6	4,021 14 0	329 6 8	3,693 10 10	218 3 2
Aligarh	Total	0	64	23	3,100 0 10	1,519 5 6	27,514 4 9	4,076 4 11	1,672 12 6
Panjab.									
Delhi	April 1907					1,340 2 0	1340 2 0		3 0 0
Ambala	1st May 1907	8	5	3 years	180 0 0	1,047 0 0	259 0 0	180 0 0	44,356 0 0
Simla	1st Oct 1907	73		1 year	515 10 3	6,730 10 3	502 2 3	6,432 14 3	207 12 0
Indiana	1900	17	70	23 & 17 years incl. genous.	1,323 0 0	2,553 5 0	0 10,963 2 7	5,615 0 0	3,863 0 0
Ferozepore	Nov. 1903	3	20	9 months and 2 years	1,168 10 0	27 5 5	1,168 2 6		8 8 0
Lahore	1st Jan. 1903		17	3 years	96 14 0	6,730 15 5	96 14 0	6,730 15 5	8 1 2
Amritsar	4th Feb. 1911	20		9 to 11 months		2,597 0 5		2,597 0 5	..
Rawalpindi	1st Sep 1907	20		No classes held this year.		805 1 0		505 1 0	5 1 0
	Total	22	234	33	1,565 8 3	2,715 0 0	30,538 0 11	5,971 5 6	58,263 5 8
									297 12 0

Including cost of
diagrams

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1913—*contd.*

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.				RECEIPTS.				EXPENDITURE.				REMARKS.	
		During year ending 30th November 1913.	From formation of branch to 30th November 1913.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1913.		Since formation of branch to 30th November 1913.		During year ending 30th November 1913.	From formation of branch to 30th November 1913.	Balance in hand on 30th November 1913.	Average monthly cost of each pupil during training.		
						(a) From E. Committee.	(b) From other sources.	(c) From E. Committee.	(d) From other sources.						
1	2	3	4	5	6	7	8			9	10	11	12	13	
Baluchistan.															
Quetta	15th Feb. 1907.	...	5	3	2 years	R. A. P. 258 0 0	R. A. P. 10,204 0 0	R. A. P. ...	R. A. P. 1,452 0 0	R. A. P. 10,643 11 0	R. A. P. 439 11 6	R. A. P. 40 5 6			
Sibi	1st Jan. 1907.	2	6	2	2 years	R. A. P. 222 0 0	R. A. P. 1,010 0 0	R. A. P. 54 0 0	R. A. P. 237 3 7	R. A. P. 1,515 13 5	R. A. P. 149 3 4	R. A. P. 9 14 2			
	TOTAL	2	11	5	...	R. A. P. 510 0 0	R. A. P. 11,914 0 0	R. A. P. 54 0 0	R. A. P. 1,689 9 7	R. A. P. 12,160 8 11	R. A. P. 589 8 2	R. A. P. ...			
Baroda.															
Baroda	1st Nov. 1912.	...	50	4	3 years	R. A. P. 700 0 0	R. A. P. 8,026 0 0	R. A. P. ...	R. A. P. 850 10 0	R. A. P. 7,037 0 3	R. A. P. 1,589 15 9	R. A. P. 8 5 0			
	TOTAL	...	50	4	...	R. A. P. 700 0 0	R. A. P. 8,026 0 0	R. A. P. ...	R. A. P. 850 10 0	R. A. P. 7,037 0 3	R. A. P. 1,589 15 9	R. A. P. ...			

Branch	Date	No.	Period	Bhopal.				Average calculated on O. S. R. 1,161-0-1 the actual pay of 11 days during the year excluding—	H. A. P.
				1896.	1897.	1898.	1899.		
Bhopal	22nd July 1896.	39	130	460 0 0	5,130 0 0	..	535 5 0	4,353 6 0	747 10 0
		30	130	460 0 0	5,130 0 0	..	535 5 0	4,353 6 0	747 10 0
	Total	..	..	..	..	..	..	..	..
Gondal's Hospital.	1st Jan. 1902.	9	3	275 0 0	2,900 0 0	..	308 0 6	2,750 0 5	110 15 7
		9	3	275 0 0	2,900 0 0	..	308 0 6	2,750 0 5	110 15 7
	Total	..	..	..	..	..	..	..	..
Lashier and Ujain.	23rd Apr. 1902.	1	68	3,500 0 0	40,200 0 0	..	2,332 3 4	31,012 8 11	9,187 7 1
		1	68	3,500 0 0	40,200 0 0	..	2,332 3 4	31,012 8 11	9,187 7 1
	Total	..	..	..	..	..	..	..	..
derabed (Deccan)	20th Dec. 1901.	7	173	2,571 9 6	23,571 9 6	..	1,853 0 1	23,311 5 6	800 4 0
		7	173	2,571 9 6	23,571 9 6	..	1,853 0 1	23,311 5 6	800 4 0
	Total	..	..	..	..	..	..	..	..

Hyderabad (Deccan).

O. S.

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

23,571 9 6

Balance of last year 1,963 0 1

300 4 0

1,963 0 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

Receipts during the year 1,963 0 1

300 4 0

1,963 0 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

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2,263 4 1

2,263 4 1

2,263 4 1

Total

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

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2,263 4 1

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2,263 4 1

2,263 4 1

2,263 4 1

2,263 4 1

Teacher's Pay

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

Clark's Pay

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

360 0 0

Contingency

100

100

100

100

100

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100

100

100

100

100

100

100

100

100

100

100

Total

721 0 0

721 0 0

721 0 0

721 0 0

721 0 0

721 0 0

721 0 0

721 0 0

721 0 0

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721 0 0

721 0 0

721 0 0

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1913—*continued*.

Stations where classes are held.	Date of formation of branch.	PEOPLE TRAINED.				RECEIPTS.		EXPENDITURE.				Remarks.
		During year ending 30th November 1913.	From formation of branch to 30th November 1913.	From E. Committee.	From other sources.	(a) From E. Committee.	(b) From other sources.	During year ending 30th November 1913.	From formation of branch to 30th November 1913.	From E. Committee.	From other sources.	
1	2	3	4	5	6	7	8	9	10	11	12	13
Indore	8th April 1907.	11	103	21	12 months.	R. A. P. 1,450 0 0	R. A. P. 15 0 0	R. A. P. 1,465 0 0	R. A. P. 17,500 7 1	R. A. P. 657 11 11	R. A. P. 6 11 1	
	TOTAL	11	103	21	..	1,450 0 0	15 0 0	1,465 0 0	17,500 7 1	657 11 11	..	
Srinagar	16th Jan. 1901.	3	20	5	2 years	..	315 0 0	315 0 0	5,937 12 0	..	7 10 0	
	TOTAL	3	20	5	..	..	315 0 0	315 0 0	5,937 12 0	..	..
Rajkot	1st June 1902.	1	3	1	1 year	102 0 0	12 8 0	1,207 0 7	39 14 0	53 13 2	747 11 5	13 12 0
	TOTAL	1	3	1	..	102 0 0	12 8 0	1,207 0 7	39 14 0	53 13 2	747 11 5	..

[illegible]

THE VICTORIA MEMORIAL SCHOLARSHIPS FUND

Statements of Accounts for the year 1913

Memorial Scholarships Fund during the year 1913.

PAYMENTS	Details	TOTAL.
	R a. p.	R a. p.
<i>Investments—</i>		
Loan to Kumar Gopika Raman Roy Wards Estate . . .	...	3,17,941 12 1
<i>Objects of Fund—</i>		
<i>Grants-in-aid—</i>		
Baluchistan	610 0 0	
Baroda	700 0 0	
Bengal	1,242 0 0	
Berar	625 0 0	
Bhopal	460 0 0	
Burma	1,320 0 0	
Central Provinces	781 0 0	
Gondal	275 0 0	
Gwalior	3,500 0 0	
Hathwa	1,500 0 0	
Hyderabad	1,717 0 0	
Indore	1,450 0 0	
Junagad	192 0 0	
Mysore	600 0 0	
Punjab	3,407 0 0	
Rajputana	3,742 0 0	
United Provinces	3,434 0 0	
Bihar and Orissa	1,152 0 0	
*Miscellaneous		
		26,607 0 0
<i>Expenses of Fund—</i>		
Salaries of Office Establishment	1,633 8 0	
Office Contingencies, including Postage, Telegrams, etc . . .	545 11 5	
Commission on investments, realizing Interest, etc . . .	1,352 11 8	
		3,531 15 1
TOTAL . . . . .	..	3,48,080 11
Closing Balance on 31st December 1913 . . . . .	..	12,636 4 7
TOTAL . . . . .	..	3,60,716 15 9

B. W. MARLOW, Colonel,
Honorary Treasurer.

Scholarships Fund up to the 31st December 1913.

EXPENDITURE.	Ledger folio	Amount.
<i>Investments—</i>		<i>R s. p.</i>
4½ per cent Rangoon Municipal Debentures of 1904	88	2,85,450 0 0
5½ per cent Loan to Ajudhia Estate, Court of Wards	98	1,00,000 0 0
6 per cent Loan to Kumar Gopala Raman Roy Estate, Court of Wards	134	3,17,941 12 1
		<u>7,03,391 12 1</u>
<i>Objects of Fund—</i>		
<i>Grants-in-aid—</i>		
Baluchistan	94	11,790 0 0
Baroda	68	8,626 0 0
Bengal	54	30,349 0 0
Berar	62	10,800 8 0
Bhopal	48	5,130 0 0
Burma	117	12,164 2 8
Central Provinces	44	10,279 0 0
Gondal	46	2,900 0 0
Gwahar	50	42,000 0 0
Hathua	56	18,000 0 0
Hyderabad	40	20,745 8 0
Indore	52	17,700 0 0
Junagadh	60	2,208 0 0
Kashmir	69	315 0 0
Mysore	42	7,700 0 0
Punjab	74	33,178 8 0
Rajputana	72	40,688 8 0
United Provinces	66	31,107 0 0
Bihar and Orissa	124	2,071 9 0
Miscellaneous	96	8,925 1 2
		<u>3,16,677 12 10</u>
Profit and Loss	63	100 0 0
	57	100 0 0
	105	16,557 0 0
	109	5,160 3 7
	113	5,948 7 5
Office Building	100	1,500 0 0
		<u>29,265 11 0</u>
TOTAL . . . . .	...	<u>10,49,435 3 11</u>
<i>Closing Balance on 31st December 1913</i> . . . . .	...	<u>12,836 4 7</u>
TOTAL . . . . .	...	<u>10,62,071 8 6</u>

B. W. MARLOW, Colonel,

Honorary Treasurer.



Investment Account of the Victoria Memorial Scholarships Fund.

	Nominal Value.	Cost.
	£ a. p.	£ a. p.
4½ per cent Rangoon Municipal Debentures of 1904	2,59,500 0 0	2,85,450 0 0
Loan at 5½ per cent per annum to Ajudhia Estate, Court of Wards	1,00,000 0 0	1,00,000 0 0
Loan at 6 per cent per annum to Kumar Gopika Raman Roy Estate, Court of Wards	3,17,941 12 1	3,17,941 12 1
TOTAL	6,77,441 12 1	7,03,391 12 1

B. W. MARLOW, Colonel,

Honorary Treasurer.

In the matter of Act XXI of 1860 of the Acts of the Viceroy and Governor-General of India in Council, being an Act for the Registration of Literary, Scientific and Charitable Societies

AND

In the matter of "The National Association for Supplying Female Medical Aid to the Women of India."

Memorandum of Association.

1. The name of the Association is "The National Association for Supplying Female Medical Aid to the Women of India."
2. The objects for which the Association is established are—
 - (1) *Medical tuition*, including the teaching and training in India of women as doctors, hospital assistants, nurses and midwives.
 - (2) *Medical relief*, including—
 - (a) the establishment under female superintendence of dispensaries and cottage hospitals for the treatment of women and children,
 - (b) the opening of female wards, under female superintendence in existing hospitals and dispensaries;
 - (c) the provision of female medical officers and attendants for existing female wards;
 - (d) the founding of hospitals for women where special funds or endowments are forthcoming.
 - (3) The supply of trained female nurses and midwives for women and children in hospitals and private houses.
 - (4) The management of the Fund raised for the above objects, and which is known as "The Countess of Dufferin's Fund."
 - (5) The purchase or acquisition on lease, or in exchange, or on hire or otherwise, of any real or personal property, and any rights or privileges necessary or convenient for the purposes of the Association.
 - (6) The erection, construction, alteration, and maintenance of any buildings necessary or convenient for the purposes of the Association.
 - (7) The sale, improvement, management and development of all or any part of the property of the Association.
 - (8) The promotion and establishment of Branches and of other Societies or Associations with similar objects, and the affiliation or amalgamation of such Societies or Associations with this Association.
 - (9) The doing of all such things as are incidental or conducive to the attainment of the above objects or any of them.
3. The names, addresses and occupations of the persons who are members of and form the

JWS —
officer and Ava, C.I.,

2nd.—The Hon'ble Mr. A. R. Scoble, Q. C., Member of the Viceroy's Council

3rd.—The Hon'ble Sir Charles Aitchison, K. C. S. J., Member of the Viceroy's Council.

4th.—The Hon'ble Sir Dinshaw Maneckjee Petit, Kt., of Bombay, Additional Member of the Viceroy's Council.

22.—A. P. MacDonnell, Esq., c/o, Secretary to the Government of India in the Home Department.

23.—The Hon'ble Mr. C. H. Manna (Messrs. Gillanders, Arbuthnot & Co., Calcutta, Managers of the Council of His Honour the Lieutenant-Governor of Bengal.

24.—The Hon'ble Sir Abdul Ahad Khan, Bahadur, c/o, of Aligarh, Member of the Council of His Honour the Lieutenant-Governor of the North-West Provinces.

25.—Sir James Wilson, c/o, Benjamin Simpson, Esq., Central Sanitary Commissioner with the Government of India.

26.—Messrs. J. and S. Mohan, Thero, Bahadur, Esq., Calcutta.

27.—Messrs. Alexander Wilson, Es. Messrs. Jardine, Skinner & Co., Calcutta, President, Bank of Bengal.

4. A copy of the Rules and Regulations of the said National Association is filed with this Memorandum of Association, and the undersigned, being some of the members of the governing body of the said National Association, hereby certify that such copy of such Rules and Regulations is a correct copy of the Rules and Regulations of the said National Association.

As witnesses our several and respective hands and signatures this 25th day of February 1885.

Witness.

HARRY COOPER, Mayor.

Esq. of the City of Calcutta.

Witnesses.

HARRIOT DUFFERIN.

ANDREW R. BOOTH.

C. F. MITCHELL.

JOHNES HORUM TAGORE.

R. SIMPSON.

FRANK MANECKJEE PETIT.

CHARLES H. MOORE.

Rules and Regulations of the National Association for Supplying Female Medical Aid to the Women of India.

The Lady President.

1. The first Lady President of the National Association is Her Excellency the Right Honourable the Countess of Dufferin, &c. On her vacating this office the power of filling the vacancy shall rest with the Central Committee.

Members.

The Members of the National Association shall consist of three classes, namely:—

A—Life Councillors, B—Life Members, and C—Ordinary Members.

Life Councillors.

3. Every donor of £500 or R5,000, or of subscriptions which in the aggregate amount to £500 or R5,000, and upwards, to the funds of the National Association, shall be a Life Councillor.

Life Members.

4. Every donor of £50 or R500, or of subscriptions which in the aggregate amount to £50 or R500, and upwards, to the funds of the National Association, shall be a Life Member.

Ordinary Members.

5. Every subscriber of not less than 10s. or R5 annually to the funds of the National Association shall, during the currency of his subscription, be an Ordinary Member of the Association. An Ordinary Member shall pay an entrance fee of £1 or R10. If he does not pay his entrance fee separately, the first £1 or R10 subscribed by him shall be treated as his entrance fee.

Rights and Privileges of Members.

6. Every member of the National Association shall be entitled to attend at, and take part in, the meetings of the Association, and, on application, to receive copies of the reports and other publications from time to time issued by the Association. Life Councillors and Life Members shall have such additional rights and privileges as may from time to time be determined by the Central Committee.

Affairs to be managed by Central Committee.

7. The general management of the affairs of the National Association shall rest with the Central Committee, who, for the purposes of Act XXI of 1860, shall be taken to be, and shall act as, the governing body of the Association.

Constitution of the Central Committee.

8. The first members of the Central Committee shall be the Lady President of the National Association, and the following gentlemen, namely—

<p>The Hon'ble Mr. A. R. SCOBLE, Q.C., <i>Member of the Viceroy's Council.</i> The Hon'ble Sir CHARLES AITCHISON, K.C.S.I., <i>Member of the Viceroy's Council.</i> A. P. MACDONNELL, Esq., <i>Secretary to the Govt. of India, Home Department.</i> Surgn.-Genl Sir BENJAMIN SIMPSON, M.D., K.C.I.E., <i>Sanitary Commissioner with the Govt. of India.</i></p>	<p>The Hon'ble Sir DINSHAW MANECKJEE PETIT, Kt., of Bombay, <i>Additional Member of the Viceroy's Council.</i> Maharaja Sir JOTENDRA MORNUN TAGORE, Bahadur, K.C.S.I. The Hon'ble Sir SYED AHMED KHAN, Bahadur, of Aligarh, K.C.S.I. The Hon'ble Mr. C. H. MOORE (Messrs. Gillanders, Arbuthnot & Co) Sir ALEXANDER WILSON, Kt. (Messrs. Jardine, Skinner & Co.), <i>President, Bank of Bengal.</i></p>
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9. The Lady President of the National Association for the time being shall be, by virtue of her office, President of the Central Committee, and shall have the power of filling vacancies in, and making additional appointments to, that Committee.

Powers of Central Committee.

10. The Central Committee shall have power—

- (a) to apply "The Countess of Dufferin's Fund" to such purposes as they may consider conducive to the objects of the National Association;
- (b) to invest from time to time, in or upon the securities hereinafter mentioned, such money credited to "The Countess of Dufferin's Fund" as may not be required for the purposes of the National Association, and to vary and realize investments;
- (c) to make and vary such regulations not inconsistent with the Memorandum of Association and these Rules as may be necessary or expedient for the conduct

of the business of the National Association, and to fix from time to time the quorum necessary for the transaction of business, but until they shall otherwise determine four members of the Central Committee shall form a quorum ; and

- (d) generally to do such things as they may consider necessary or expedient for the purpose of carrying out the objects of the National Association.

Duties of Central Committee.

11. The Central Committee shall directly control local operation for the objects of the National Association in those parts of the country where a Branch Association, such as is hereinafter referred to, does not exist. It shall specially endeavour to assist any Ruling Chiefs who may desire to organize similar operations within their own territories, and who may seek the advice or aid of the National Association. It shall publish periodical statements of the accounts and the reports of the work done by the National Association, by the Branch Associations aforesaid, and by Societies affiliated to the National Association.

Officers.

12. The Central Committee shall have power to appoint from time to time an Honorary Secretary and other officers of the National Association, and to delegate to such officers such of their powers as they may consider expedient. The first Honorary Secretary shall be Major Harry Cooper, A.-D.-C.

Funds.

13. All moneys subscribed to the support of the objects of the Association shall constitute "The Countess of Dufferin's Fund." The funds under the control of the Executive Committees of the several Branches shall be designated "[.....] Branch of the Countess of Dufferin's Fund." All moneys paid to the Honorary Secretaries of Branches will be credited to the fund at command of the particular Branch to the Honorary Secretary of which the same has been paid, unless specially designated for the Central Committee.

Investments.

14. Any moneys which, in the opinion of the Central Committee, it shall be from time to time necessary or expedient to invest, shall be invested in the joint names of not less than two of the members of such Central Committee, as Trustees for the Association, in some or one of the following securities, but in no others, that is to say :—

- (i) In promissory notes, debentures, stock and other securities of the Government of India, or of the United Kingdom of Great Britain and Ireland.
- (ii) In bonds, debentures and annuities charged by the Imperial Parliament on the revenues of India.
- (iii) In stock or debentures of, or shares in, railway or other companies, the interest whereon shall have been guaranteed by the Secretary of State for India.
- (iv) In debentures or other securities for money issued by, or on behalf of, any Municipal body under the authority of any Act of a Legislature established in British India, or in debentures or other securities issued by, or on behalf of, the Commissioners of the Port of Calcutta, the Trustees of the Port of Bombay, the Trustees of the Harbour of Madras, the Trustees of the Port of Karachi, or the Commissioners of the Port of Rangoon, or by, or on behalf of, any other local authority under the authority of any Act of a Legislature established in British India.

- (v) On mortgage of moveable and immoveable property under the management of the Court of Wards
- (vi) In any investments not hereinbefore specified, authorized for the investment of trust funds by the Indian Trusts Act, 1882 (Act II of 1882), or any re-enactment or statutory modification thereof.

General Meetings.

15. A General Meeting of the National Association shall be held once in every year at Calcutta during the cold season at such time and place as the Central Committee may appoint, provided that at least seven days' notice of the time and place so appointed be given by advertisement as hereinafter provided. At this meeting the Central Committee shall present a report, showing the proceedings and progress of the Association during the past year and its financial position.

Special Meetings.

16. The Central Committee may at any time, and shall upon a written requisition by not less than ten Life Councillors or Life Members in that behalf, call a Special Meeting of the Association. Notice of such meeting shall be given as provided in rule 15, and such notice shall state the purpose for which such Special Meeting is to be called.

Notices.

17. Any notice required to be or which may be given by advertisement shall be advertised in such newspapers as the Central Committee may from time to time direct in that behalf.

Branch Associations.

18. Each Branch Association will have the independent management of its own affairs and funds (which funds shall include all sums paid to the Association and specially designated for such Branch and all sums paid to the Honorary Secretary of such Branch and not specially designated for the Central Committee), and the Committee for the time being of each Branch shall accordingly in respect of the funds of such Branch have and be subject to the like powers and duties as to investment of moneys as those conferred and imposed upon the Central Committee by rule 10 (b) and rule 14, respectively, and such Branch Committee in lieu of the Central Committee may and shall accordingly exercise and perform such powers and duties in respect of any moneys forming part of such Branch funds which in the opinion of such Branch Committee it shall be necessary or expedient to invest by investing the same in the joint names of not less than two members of such Branch Committee as Trustees for its Branch in some or one of the securities or investments mentioned in rule 14, but in no others. The Managing Committee of each Branch will be expected to act as the local agents and representatives of the Central Committee and to contribute from the Branch funds to the Central Committee such amount as may from time to time be arranged between the Central Committee and the Committee of the Branch concerned.

Affiliated Societies.

19. Any Society established for objects similar to those of the National Association may, with the permission of the Central Committee, affiliate itself to the National Association. An affiliated Society shall, unless if otherwise desired, remain independent in the administration of its funds and the conduct of its operations, but will be requested to furnish to the Central Committee such reports and information as may be mutually agreed on, and to assist by correspondence and conference in the furtherance of their common objects. On the other hand, the Central Committee shall have power to assist

affiliated Societies in such manner and to such extent as may be considered by them consistent with the rules and conducive to the special objects of the National Association.

Co-operation with Medical Officers of Government.

20. All persons employed by the Association will ordinarily be expected to act in co-operation with, and where necessary, in subordination to the medical officers of Government.

Bankers.

21. The Bankers of the National Association shall, until it is otherwise arranged by the Central Committee, be the Bank of Bengal in India, and Messrs. Coutts & Co. in England.

22. No alteration shall be made in the above Rules and Regulations, except by the vote of a majority of the members present at a Special Meeting called for that purpose as hereinbefore provided.

WITNESS.

HARRY COOPER, Major,
Loyal North Lancashire Regiment.

SIGNATURES.

HARRIOT DUFFERIN.
ANDREW R. SCOBLE.
C. U. AITCHISON.
JOTENDRA MOHUN TAGORE.
B. SIMPSON.
DINSAW MANECKJEE PETIT.
CHARLES H. MOORE.

NOTE.—Rules 14 and 18 were amended as above at a General Meeting of the Association held at Government House, Calcutta, on the 14th February 1908.

Rule 20 was amended as above at a Special Meeting of the Association held at Government House, Calcutta, on the 6th March 1912.

CENTRAL COMMITTEE.

Lady President.

HER EXCELLENCY THE LADY HARDINGE OF PENSHURST, C.I.

Members.

The Hon'ble Sir S. H. BUTLER, K.C.S.I., C.I.E.,
Member of the Viceroy's Council.

The Hon'ble Mr. SYED ALI IMAM, C.S.I., *Member of the Viceroy's Council.*

The Hon'ble Sir R. CRADDOCK, K.C.S.I., *Member of the Viceroy's Council.*

The Hon'ble Surgeon-General Sir C. P. LUXIS, K.C.S.I., *Director-General of the Indian Medical Service.*

The Hon'ble Lt.-Col. Sir A. H. McMAHON, G.C.V.O., K.C.I.E., C.S.I., *Secretary to the Government of India, Foreign Department.*

Dr. K. O. VAUGHAN, M.B.

Raja Sir HARNAM SINGH, K.C.I.E., Ahluwalia of Kapurthala.

The Hon'ble Sir G. R. M. CHITNAVIS, K.C.I.E.

The Hon'ble Nawab MUMTAZ-UD-DAULA, Sir MUH'D FAIYAZ ALI, KHAN, K.C.V.O., K.C.I.E., C.S.I.

The Hon'ble Maharaja Dhiraj Bahadur Sir BIJAY CHAND MAHTAB, of Bardwan, K.C.S.I., K.C.I.E., I.O.M.

Lt.-Col. J. R. ROBERTS, C.I.E., I.M.S.,
Surgeon to His Excellency the Viceroy.

Honorary Secretary.

Lt.-Col. J. R. ROBERTS, C.I.E., I.M.S., Viceroy's Camp.

Permanent Joint Secretary.

E. J. BUCK, Esq., Viceroy's Camp.

Permanent Assistant Secretary.

W. G. A. HANRAHAN, Esq., Viceroy's Camp.

Honorary Treasurer.

Colonel B. W. MARLOW, C.I.E., Military Accountant-General.

Honorary Auditor.

R. W. GILLAN, Esq., C.S.I., I.C.S., Comptroller and Auditor-General.

Honorary Solicitors.

Messrs. SANDESON & Co., Calcutta.

Bankers.

BANK OF BENGAL, Calcutta.

Messrs. COUTTS & Co., 59, Strand, London.

Honorary Secretaries to Branches of the Association.

United Kingdom Branch.

THE MOST HONOURABLE THE DOWAGER MARCHIONESS OF DUFFERIN AND AVA, V. & A.,
C.I., Clandeboyne, Ireland

For the Scholarship Department.—Secretary, Mrs. Bell, 12, St. Leonard's Road, Ealing,
London.

Assam.

Col. R. N. CAMPBELL, C.I.E., I.M.S., Shillong.

Baluchistan.

Lt.-Col. A. L. DUKE, I.M.S., Quetta.

Bengal.

Capt. J. H. BURGESS, I.M.S., Govt. House,
Calcutta.

Berar.

Lt.-Col. H. E. BANATVALA, I.M.S., Amraoti.

Bihar and Orissa.

C. B. BAYLEY, Esq., C.V.O., Govt. House, Ranchi.

Bombay.

Capt. T. C. LUCAS, R.A.M.C., Govt. House.

Burma.

A. D. KEITH, Esq., Rangoon College, Rangoon.

Central Provinces.

G. SHERLOCK-HUBBARD, Esq., Nagpur.

Madras.

Capt. H. SCOTT, I.M.S., Govt. House.

Mysore.

Dr. P. S. ACHYUTA RAO, Bangalore.

N.-W. F. Province.

Lt.-Col. T. F. IRVINE, I.M.S., Peshawar.

Punjab.

Major E. C. BAYLEY, I.A., C.I.E., Govt. House,
Lahore.

U. P. of Agra and Oudh.

J. M. CLAY, Esq., I.C.S., Allahabad.

The National Association for Supplying Female Medical Aid to the Women of India.

Twenty-eighth Report of the Central Committee for the year 1912.

IN presenting its Twenty-eighth Annual Report of the National Association for providing Female Medical Aid to the Women of India the Central Committee is glad to be able to again present a statement indicating steady progress throughout the country.

The objects for which the Victoria Memorial Scholarships Fund was inaugurated are now being steadily attained in various centres in India, and a separate account of the work accomplished in this direction is again given under a special heading at the end of this volume.

The report contains the statistics and details of the main operations of the Fund during the past year, and it also includes a précis of the work accomplished in Baluchistan, Mysore, North-West Frontier Province and certain Native States which do not publish separate reports. Those who are interested in the details of relief which has been afforded in Bengal, Berar, Bihar and Orissa, Bombay, Burma, the Central Provinces, Madras, the Punjab, and the United Provinces of Agra and Oudh can obtain the provincial reports through the respective Honorary Secretaries of these branches.

Her Excellency the Lady Hardinge of Penshurst as Lady President of the Central Committee made inspection visits to a number of hospitals during the year. Among these institutions were the hospitals at Delhi, Agra, Simla, Lahore, and Benares. Her Excellency has been much gratified at seeing the progress which has been made in many directions, and at the excellent work which is being performed by the Lady Doctors.

In its report for 1911 the Central Committee published full details of the steps which it was taking to improve the pay and prospects of medical women working in India, and it can only add to what has already been stated by saying that this matter is still 'engaging its earnest attention.'

Scheme for
Female
Medical
Service.

The Committee has, however, been informed by the Government of India that it is in active communication with the Secretary of State on the subject, and it has every hope that a special grant from Imperial revenue will presently be sanctioned. With the aid of this grant the Committee trusts that a definite service of a limited number of medical women, to be termed "The Women's Medical Service in India," under the control of the Central Committee of the National Association for supplying Female Medical Aid to the Women of India, will come into being. The Provincial Committees are now being consulted on various points in connection with this service, and the Central Committee has reasonable hope that in the current year the scheme will be sanctioned and gradually introduced.

In an annexure to this report will be found the account of the special meeting of the Association which was held at Government House, Calcutta, on the 6th March 1912 when Rule 20 of the Memorandum of the Association was amended. The rule now reads as follows:—"All persons employed by the Association will ordinarily be expected to act in co-operation with, and where necessary in subordination to, the Medical Officers of Government."

Scheme for a
Medical
College,
Hospital and
Training
School for
Nurses.

An important matter to which Her Excellency Lady Hardinge has given much thought and attention during the year under review is the establishment of a Medical College and Hospital for Women, and for a Training School for Nurses at Delhi. The experience gained by the Dufferin Fund has shown how necessary both of these institutions have become, and Delhi has been chosen as the centre, partly because it was the scene of Their Imperial Majesties' recent visit to India, and partly because the cities of Calcutta, Bombay, Madras, Lucknow and Lahore already have big Medical Colleges and Hospitals.

Lady Hardinge has already been promised fifteen lakhs of rupees by the Princes of India towards the initial cost, and it is hoped that the Government of India will agree to provide the annual maintenance charges after the buildings have been erected.

As soon as the success of the scheme is assured it is proposed that Her Imperial Majesty shall be asked to allow the College and School to bear her name in commemoration of her visit to Delhi, and in token of her gracious interest in the welfare of the women of India.

Full details of the proposed scheme will be found in Annexure II of this report.

Lady Doctors.

The changes during the year 1912 have been rather fewer than usual. Amongst the most important may be mentioned the following:—

Miss I. Keess, L.M.S., was appointed to the new Minto Female Hospital at the Malakand. The vacancy at the Female Hospital at Amraoti in Berar recently vacated by Miss L. Trewby, L.R.C.P. & S., has been filled by the appointment of Miss M. Conway, L.R.C.P. & S.

At Rangoon, Miss H. J. C. Maclaren, M.A., M.B., Ch.B., who was compelled during the year to take medical leave to Europe, has since rejoined her post.

The question of leave for Miss J. George, L.R.C.P. & S., in charge of the Jaswant Female Hospital at Benares, has also been before the Provincial Committee of the United Provinces, and it is probable that Miss George will proceed on leave at an early date. Miss P. T. Copeland, M.D., M.B., Ch.B., was selected for the appointment in the Lady Aitchison Hospital, Lahore, *vice* Miss D. Pratt, M.D., M.B., resigned.

The local authorities at Sholapur have been furnished with a list of lady candidates for employment in connection with a possible vacancy at that station. A leave vacancy is also pending at Bikanir, and a lady of the assistant surgeon grade will shortly be placed in charge of a new hospital at Shegaon in the Central Provinces.

At Nagpur, Mrs. G. E. O'Brien, M.B., who recently went on leave to Europe, resigns her appointment early in the coming year.

In previous reports the Committee has dealt fully with the grievances which lady doctors in India have brought forward with regard to their pay and status, and has more than once expressed its sympathy with them. In the opening paragraphs of their report the Committee explain fully how the position now stands.

For the present the Committee is constrained to repeat its remarks in earlier reports:—'The funds at the command of the Association, as will be seen from the financial statements later on, are strictly limited, and it should be clearly recognised by those who accept posts under the Fund that it is essentially a charitable and more or less struggling Association which endeavours to provide as full medical relief as possible to women of all classes in India with a comparatively very small income.

The Committee thinks it well to again point out that, owing to the steady annual increase in the number of ladies who possess the higher degrees in medicine, the Association cannot guarantee to provide employment carrying a suitable remuneration immediately it is required, or indeed within any given period. The number of appointments, especially those carrying the recognized pay of the higher grade, are strictly limited, and the most the Central Committee can do is to endeavour to fill such vacancies as arise with the best material at its disposal. In all cases where the Central Committee is asked to recommend a lady for a post in a Native State or for a particular hospital the claims of every registered candidate for employment receive full and impartial consideration. It should also be borne in mind that the final selection and appointment of candidates for a considerable number of posts, as well as the terms during which it is considered expedient they should hold those posts, rests with the local authorities concerned. The fact, moreover, that the Central Committee has assisted students, who have been recommended by the Principals of Medical Colleges in India as likely to

successful medical women, with scholarships during their college careers, does not in any way render the Committee responsible for providing them with permanent employment under the Association. Nor does it guarantee to provide with first grade posts immediately on their return to India ladies whom it may have recommended to the United Kingdom Branch as worthy of assistance, in order that they may take the higher degrees in medicine. It has happened sometimes during past years that ladies who have not been altogether satisfied with their posts have resigned them somewhat suddenly, sometimes before they have taken the precaution of securing the promise of a new appointment. As the supply of medical women continues to be considerably in excess of the demand, especially where the higher paid posts are in question, the Committee takes this opportunity of again warning all ladies connected with the Fund that they run considerable risk in hastily throwing up appointments, however uncongenial they may appear to be.

The Central Committee begs also to remind Honorary Secretaries of Provincial and Local Committees that a list of candidates for employment is always maintained in its office, and to state that if ladies who wish to proceed on leave would notify their desire as early as possible to their Local or Provincial Committees, it would much facilitate the work of those who have to arrange for filling their posts during their absence.

In Appendix III are given details of women and children treated by female agency in zenana hospitals, wards and dispensaries throughout the country.

It will be seen that in Native States no less than 617,814 patients were treated in hospitals officered by women.

As the majority of these hospitals undoubtedly owe their origin to the efforts of the Dufferin Fund, and as a considerable number are now officered either by lady doctors nominated by the Central Committee, or by ladies who were materially assisted in their medical studies by the Association, the Committee considers that it has every right to take to itself substantial credit for the success attained in this direction.

The actual number of women treated in (a) hospitals mainly controlled and aided by the Dufferin Fund was 331,116 and the number treated in (b) hospitals assisted by the Dufferin Fund was 348,998.

The work accomplished by Missionary Societies is not here reviewed, and the tables contain no details of patients treated by many midwives who have received their training through the Countess of Dufferin's Fund.

There are, moreover, a number of private female practitioners in India, many of whom have been at some time or other connected with the Association, and some of whom have received scholarships and direct assistance at its hands; but the Association is not in a position to obtain details of the useful work accomplished by these ladies.

Patients
treated
during the
year.

The Committee trusts that Honorary Secretaries and Lady Doctors will continue to see that returns are submitted on the principle which has been laid down by the Government of India for the State hospitals

One of the purposes of the returns is the comparison they afford of the work accomplished in institutions of corresponding size and scope, but such comparison is difficult, or impossible, if in one case the figures representing patients treated are the number of the total *visits* or *attendances* of new and old patients, while in another they are the number of the *individuals* or of *new patients* only. If statistics are to be of any value, they must be compiled on one uniform basis. If, for example, the same person attends for 10 days, she should not be counted 10 times, but if she reappears as a fresh case she should be counted again. The returns should include both those patients remaining from the previous year and those admitted during the year under report. The Central Committee, having had its attention drawn to the probable inaccuracy of some of the returns, again desires to make the position quite clear

The Committee has received lists from the Provinces giving the numbers Students. of the students at present in the principal medical colleges and schools in India (Appendix I). These show that there are 38 European and Indian ladies training for the full M.B. course, 62 as assistant surgeons, 111 as hospital assistants, and 346 as nurses, *dais* and compounders.

The Central Committee assists a certain number of students in each provincial centre with scholarships to help them in their medical studies, but the demand for these awards continues to far exceed the number at the disposal of the Committee.

Of the 211 who are being trained in medical work, no less than 89 are being supported with scholarships provided by the Dufferin Fund, 48 are in receipt of Government scholarships, 19 are being trained with university or school scholarships, 16 are being educated at the expense of Native States and 6 are assisted by local District Boards and Municipalities.

All details regarding scholarships granted by the Central Committee, as also a short note of guidance for those who propose pursuing their studies in England, can be obtained on application to the Honorary Secretary of the Central Committee, or to the Principals of the Medical Colleges of Calcutta, Madras, Bombay, and Lahore, and particulars regarding those given by Provincial Committees on application to the Honorary Secretaries of Provincial Branches.

The Assam Branch, which has been formed owing to the recent rearrange-
ment of Provinces, reports that its sole income was Rs.3,000 received from
the Local Administration. It further reports that the movement is rapidly
advancing in popularity, and it is proposed to open a *Dai* class at the Berry-
White Medical School at Dibrugarh so that a sufficient number of trained

Summaries
of Provincial
Branches.

dais may be available for the Provincial demands. It is also contemplated to start *Dai* classes at selected Sadar stations.

The *Bengal* Branch submits a report which is decidedly more encouraging than that of the previous year.

The Bengal Branch is governed by a Committee consisting of 22 members including the Honorary Secretary and the Honorary Treasurers. The Hon'ble Sir William Duke was the Patron and Lady Duke the Patroness of the Fund up to the 31st March 1912. Since the formation of the newly constituted Presidency of Bengal, which took place on the 1st April 1912 Lord Carmichael, Governor of Bengal, and Lady Carmichael have become the Patron and Patroness of the Fund. Her Excellency has already begun to take a keen and lively interest in all the affairs of the Dufferin Hospitals, and the Bengal Committee record with grateful thanks their high appreciation of the very valuable advice and assistance given by her.

The Central Committee notes with pleasure that Colonel Green, who has done such valuable work as Honorary Secretary of the Bengal Branch for many years past, has now joined the Executive Committee of the Branch.

Owing to the territorial redistribution of Bengal, which has marked an epoch in the annals of this Presidency, the working of some of the most important hospitals and institutions hitherto under the auspices of this Branch Association has been excluded from this year's report, as they have been transferred to the new Province of Bihar and Orissa. Their places, however, have been more than filled up by the incoming of several hospitals and institutions from the old Province of Eastern Bengal and Assam which, it is a pleasure to note, are no less important than those transferred to the new Province. Indeed the working of some of these hospitals, *e.g.*, the Bidyamoyee Female Hospital, Mymensingh, the Faizunessa Zenana Hospital, Comilla, Tipperah, the Cox's Bazar Dispensary, Chittagong, the Taherunessa Female Hospital, Bogra, amongst others, shows a very high-water mark of success, more especially as the bulk of the population in those places is Mahomedan.

For the above reasons the comparison of the figures of patients treated in the year is of no practical importance.

The fact that several hospitals show an increase in purdah patients is a convincing proof that the work of the Association is steadily increasing and that its sphere of action is extending.

The Bengal Government during the year was asked for further assistance towards the Dufferin Victoria Hospital and agreed to raise its annual grant from R4,500 to R12,000 for two years to enable the Branch to place its finances on a more stable basis. The hospital, which is expanding every year, costs about R45,000 annually to maintain, and has benefited by R6,490 which was paid by the Municipality for a piece of land taken up in 1907 to improve Scott's Lane.

The Central Committee note that Rai Jyot Kumar Mukherjee Bahadur

of Utterpara (Hughly) generously gave Rs5,000 to the Fund in the latter portion of the year. The Branch has invested a sum of Rs50,000 in a Court of Wards Estate at 6 per cent. in the Central Provinces during the year, and hopes to shortly invest a further Rs50,000 in another estate in Bengal.

The Bengal report contains the following :—

"While visiting the Dufferin Hospitals in different parts of Bengal, Lady Carmichael could not help feeling that they are not doing as much for purdah women as their original promoters intended that they should do. It seemed to her also that there is not as much sympathy in mofussil districts as there might be for the Dufferin Fund. Almost all the available money of the Fund is swallowed up by the Hospital in Calcutta; people in the mofussil districts see this and are not inclined to contribute to a fund which seems to them to benefit Calcutta alone. It struck Her Excellency that it might bring the Dufferin Association more in line with what was originally intended, *viz.*, the treatment of purdah ladies, if an attempt were made in the Victoria Dufferin Hospital to encourage the training of a better class of women as nurses. Possibly such an attempt might, through the nurses, bring the Victoria Dufferin Hospital more in touch with the country districts.

"At present nursing associated as it is with the word 'Dai' is unpopular and nurses are looked down upon. Probably nothing would help more to efface this impression than if some ladies of the higher castes would take up nursing as a profession and so set an example. It occurred to Her Excellency that this might be more easily accomplished in a hospital where there are only women doctors with purdah arrangements such as those of the Victoria Dufferin Hospital, than in any other hospital in Calcutta. A Sub-Committee was accordingly appointed to go into the question and to work out the details of a scheme to raise the status of Indian nurses. The report of the Sub-Committee is appended. As can be seen the idea is to give a start to this scheme in a small way in the Victoria Hospital, Calcutta, with the hope that a better class of women may go in for nursing if requisite facilities are rendered to them. To meet the expenditure for carrying out this humane project, the donation by Rai Jyot Kumar Mukherjee, Bahadur, has been set apart, and Lady Carmichael has contributed Rs1,000 for the furtherance of the objects of this scheme."

The *Bihar and Orissa Branch* which started shortly after the cession of the new Province has issued its first report.

The Branch has only six centres and in two of these, Darbhanga and Bettiah, the Dufferin hospitals are entirely maintained by the respective estates.

Certain annual grants which were originally made by Bengal to Hazaribagh, Patna and Monghyr have been transferred to the new Province, but the Branch has no capital or funds of any kind, and the report states that if

the Dufferin Fund is to be kept alive some means of financing it will have to be found. Before the next report issues it is, however, hoped some solution may have been found which will enable the work to be carried on with increased financial resources.

The *Bombay* report states that the year has been one of steady progress and prosperity for the Province in its special work and objects, viz., "the training and supply of female nurses and midwives for the women and children in the city of Bombay and in the mofussil." Twenty-six probationers, of whom five are Brahmins, are going through a course at the Cama Hospital, and the Nursing Association in connection with the Cama and Allbless Hospitals is doing excellent work.

Reports from the mofussil are encouraging and several district nursing associations have been formed. Interesting accounts of the work done at Karachi, Hyderabad (Sind), Shikarpur and other centres are given in the report.

The *Burma* report states that 656 obstetrical cases were treated in the Dufferin Hospital against 566 in the previous year, while no less than 16,282 patients were treated in the out-patient department. It is noted that the attendance of Burmese patients was respectively 180 and 6,085 of the above totals.

Miss Brooking, L.M.S., was in charge of the hospital for the greater portion of the year, Miss Maclaren returning from sick leave on 2nd November. Mr. A. D. Keith acted as Honorary Secretary throughout the year.

The financial status of the hospital is causing the Committee much anxiety, as the income amounted to Rs26,553, while the expenditure was Rs34,401, and several necessary repairs cannot be carried out for want of funds. The receipts from hospital patients were Rs5,729, while the public donations and subscriptions were Rs1,887.

The *Madras* report says it is glad to again record steady and satisfactory progress, and that the Western treatment is increasing in popularity in the hospitals and dispensaries in the Province. Only Rs60 were received from the public during the year, and the Committee again appeals for more generous support in the future. It is stated that there has recently been great difficulty in obtaining lady medical practitioners to take charge of dispensaries and hospitals in the Presidency at the salaries offered, and in several hospitals at important centres male assistants have acted for several months. It is also pointed out that at present no students are stipended by local bodies, and district boards are urged to train students, the cost being no more than Rs1,200 for a four years' course.

The report runs—"The backbone of the whole Dufferin Fund scheme is medical tuition. We cannot get on without medical women: their numbers are limited, and we have to bear in mind that those who get married, as a rule, fall out of the ranks of workers. The duty of the Fund, then, so far

as medical tuition is concerned, will be to keep the subject before every Local Fund, Board, and Municipal Council, and every Native gentleman, until every large town and Native State is supplied, or until they recognise their duties so far that our reminders will be unnecessary."

The Victoria Caste and Gosha Hospital, which is managed by the Provincial Committee, treated 18,474 patients during the year, of which 896 were maternity cases. Thirty-seven beds are now permanently endowed in the hospital, and sixteen were supported during the year by various ladies and gentlemen at a cost of Rs72 each. Lord and Lady Pentland have now assumed the offices of Patron and Patroness of the Association, and in honour of their first visit to the hospital Mr. G. Narayanaswami Chetti presented new clothes to all the poor patients.

The Punjab report states that the monthly grant of Rs300 was continued to the Lady Aitchison Hospital during the year, while the Lady Lyall Home for female students was entirely maintained by the Branch. During the year the building was used by the Mayo Hospital authorities to provide accommodation for their nurses, and a bungalow was taken for the students, the monthly rental of which was met by the Hospital authorities. The cost of maintaining the Home during the year was Rs500.

The Punjab Government contributed Rs2,100 and the subscriptions and donations from private individuals amounted to Rs1,201, while the District Boards of Attock, Gujranwala and Rawalpindi gave Rs612. A sum of Rs757 was expended on scholarships. The actual receipts of the Branch in 1911 were Rs9,708, and in 1912 Rs8,302, while the expenditure in 1911 was Rs12,145, and in 1912 Rs8,267. The local reports show that good work is being done in several districts in affording female medical relief.

The report of the United Provinces gives a full and interesting account of the work accomplished in those Provinces. The statistics show that while during the previous year there was a decreased attendance both in the in-door and out-door departments, the year under review was marked by an increase. The in-door attendance increased from 10,412 to 11,138 and the out-door from 209,740 to 219,198. The total attendance was 230,336 against 220,152 during 1911, or an increase of 10,184. The increase is the more remarkable considering the year was a healthy one, and the malaria incidence not high (the total attendance on account of this disease in every class of hospital throughout the Province amounted to 599,333 against 652,954). The increased attendance is a clear indication that the Dufferin Hospitals continue to maintain in no small measure their popularity.

The number of visits paid by lady doctors and female sub-assistant surgeons throughout the Province during the last two years to women at their homes were 5,927. The midwifery cases have steadily increased from 1,022 in 1910 to 1,592 in 1912. Naini Tal as usual heads the list with the

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largest number of cases visited, 568 against 536 in the previous year. Then comes Dehra Dun (485), Bahraich (434), Bareilly (405), Allahabad (358), Shahjahanpur (307) and Fyzabad (228). Bahraich heads the list of the number of visits paid in midwifery cases (294) with Bareilly next (223) and then Shahjahanpur (178).

In Lucknow which headed the list last year with 171 midwifery, only 92 cases were attended during the year under review out of a total number of 210 cases. The district is capable of better results and the attention of the Lady Doctor will be drawn to the fact. It is disappointing to find that very little work in this line has been done at the large centres of Agra, Cawnpore and Benares and that Meerut has a blank return. The reason for this will be ascertained. The slight increase shown last year in the number of cases treated at Kheri, Pilibhit, Partabgarh and Fatehpur has not been maintained, and Muzaffarnagar also shows a still further reduction.

Lady Doctor Miss George of Benares heads the list of selected operations performed with 117 operations; then comes Miss O'Brien 114, Mrs. Hardy 96, Miss Watts 80, Miss Singh 77 and Miss Bonnar 73. Of these operations, 284 were obstetric cases. Miss George also performed 47 operations for cataract.

The new quarters for nurses at Agra for which Government sanctioned the funds, were completed during the year. A beautifully designed gateway with massive wooden gates has been added to the Aligarh hospital through the generosity of Rani Khushal Kumar Sahiba of Barauli, and quarters have also been provided for the female sub-assistant surgeon and compounder at this hospital. Funds have been collected by private contributions for an extra private ward at Bara Banki, and several improved buildings are under construction at Benares. The dispensary at Bijnor is being re-roofed, and the new hospital at Meerut has been completed.

As mentioned last year an increased sum of Rs87 in annual subscriptions has been arranged at Mirzapur to meet the extra cost for the appointment of a lady doctor to the hospital. The operation room at Partabgarh and the assistant surgeon's quarters at Pilibhit are being improved. New labour and confinement rooms, 2 septic wards, 2 purdah wards and 2 kitchens for patients have been provided at Saharanpur, at which place it is proposed to appoint a better qualified medical woman from the 1st April next. A sum of Rs1,500 has also been promised for an operation theatre for this hospital. An urgent need at Cawnpore is the provision of accommodation for the better class of European maternity patients, and Rs5,000 are needed for the purpose. The Dufferin Hospital at Gorakhpur is to be remodelled on an extensive scale, and a new female hospital is to be built at Mainpuri. The scheme for a new hospital at Fyzabad is still in abeyance for want of funds. For several years the available accommodation at this

hospital has been stretched to its utmost limit and, in spite of the numbers who desire to resort to it for treatment, no more can be admitted. The provincial report states that it is very little short of a scandal that a large city like Fyzabad does not provide more facilities for medical relief to its female population where there is such an urgent outcry for it. The whole female hospital is on a scale suited to a small tahsil head-quarters rather than to two large cities of the size of Fyzabad and Ajodhia.

There are nine lady doctors in the United Provinces holding English qualifications, three licenciates in medicine and surgery, eight certificated practitioners, and fifty-one female sub-assistant surgeons. These latter are employed in independent charge of the smaller hospitals, while a few are in subordinate charge at the larger hospitals under Lady Doctors. There were many changes at Agra during the year. Miss Yerbury resigned her appointment from the 1st of May, and was succeeded by Miss Watts as senior Lady Doctor, and when Miss Copeland resigned from the 1st May, Miss D'Abieu, the third Lady Doctor, discharged the duties of the 2nd Lady Doctor in addition to her own, till the 18th July, when Miss Commissariat relieved her as second Lady Doctor. The latter was in turn relieved by Miss O'Neill in September. Miss D'Abreu went on short leave early in August and resigned at its close in order to study in England. She was succeeded for a short time by Mrs. Cornwall.

This is the first completed year since a reserve Lady Doctor has been employed, and during the greater part of 1912 it has been possible to retain her at Agra. The effect of this has been of great advantage to the school, and it is hoped that the request which has been made this year for funds to keep on permanently a third Lady Doctor of the first class at Agra, for hospital and for instructional purposes can be complied with.

The Local Government has also been asked to increase their annual recurring grant to the Provincial Committee in order to enable the Committee to raise the pay of the seven staff nurses entertained in the larger hospitals, and to entertain three more staff nurses for Allahabad and Agra, and a tenth probationer nurse at Agra.

The training of nurses, compounders and dais is carried on at the centres of Agra, Allahabad, Benares, Bareilly, Lucknow and Cawnpore.

The Central Provinces report shows that its operations were confined to Nagpur, Jubbulpore and Saugor. The demands of the two former Branches taxed the resources of the Branch so severely that any extension of its operations was quite impossible.

There were decreases in the number of patients treated both at Nagpur and Jubbulpore, mainly due to the fact that in these centres the Lady Doctor were absent on leave, thus proving the common experience that the presence of the Lady Doctor in charge has much to do with the popularity of the dispensary.

others maintained from independent sources, the total value of institutions engaged in furthering the objects of the Association is now computed at close on 53 lakhs.

Patients.—In hospitals more or less controlled and assisted by the Association or at their homes, and in Native States, about 1,297,428 women and children received medical aid during the year under review.

Lady Doctors.—Forty-nine Lady Doctors of the first grade, 97 assistant surgeons, and 434 hospital assistants, etc., besides a large number of midwives and nurses not included in these statistics, are employed in the various zenana hospitals and institutions in India.

Female Students.—The Branch returns show that, including nurses and compounders, 557 women are at present studying medicine or are undergoing training of some nature in various classes of the medical colleges, schools and hospitals in the different Provinces.

Receipts.—The total receipts of the Central Committee, since the Association was incorporated, have up to date amounted to R15,24,261. This does not include a sum of nearly seven lakhs subscribed towards the Victoria Memorial Scholarships Fund which was inaugurated by Lady Curzon in 1901-02.

Disbursements.—A sum of R7,41,128 has been re-allotted by the Central Committee to Provincial Branches, or expended in grants-in-aid within their limits for various objects.

Investments.—The amount now invested by the Central Committee, Provincial and District Branches, is R23,58,368.

United Kingdom Branch.—The Report of the United Kingdom Branch for 1912 shows that the amount received by it in subscriptions and donations was £245. It also has an invested fund of £2,274.

J. R. ROBERTS,
Honorary Secretary.

SIMLA:
15th May 1913.

ANNEXURE I.

Proceedings of a Special Meeting, dated the 6th March 1912.

A special meeting of the Countess of Dufferin Fund was held on Wednesday morning, the 6th March 1912, at Government House, Calcutta, when Her Excellency The Lady Hardinge of Penshurst presided. There were present the Hon'ble Sir Harcourt Butler, Sir Reginald Craddock, Mr. Ali Imam, Sir Henry McMahon, Sir C. P. Lukis, and Sir G. M. Chitnavis, Colonel W. B. Marlow, Lieutenant-Colonel Green, I.M.S., Lieutenant-Colonel O'Kinealy, Mr. E. J. Buck, Mr. W. G. A. Hanrahan, Dr. (Miss) Vaughan, Dr. (Miss) Platt, and several other Lady Doctors.

Sir Harcourt Butler proposed that Article 20 of the Rules and Regulations of the Association be amended. The present rule runs—"All persons employed by the Association will be required, as a condition of their employment, to act in harmony with, and where necessary in subordination to, the medical officers of the Government."

It is proposed the amended rule shall be—"All persons employed by the Association will ordinarily be expected to act in co-operation with, and where necessary in subordination to, the medical officers of Government."

The Hon'ble Sir Harcourt Butler said :—Your Excellency, Ladies and Gentlemen,—I beg to move the amendment which stands in my name in regard to Article No. 20 of the Rules and Regulations of the National Association for Providing Female Medical Aid to the Women of India. These rules date, with, I believe, only one change and that in regard to investments from the foundation of the Association. We are naturally very chary of altering rules and regulations which will always be associated with the illustrious and honoured name of Countess of Dufferin; but conditions have changed considerably in the last few years and the relations of medical women employed by the Association to the medical officers of Government have been the subject of a good deal of discussion. The matter was mentioned in our last report, when we said :—

"With regard to the question of granting Lady Doctors entire ~~control~~ and independence of their hospitals, the opinion appears to be that ~~again~~ ladies holding the higher qualifications in medicine may generally be ~~entrusted~~ trusted with the internal control of their hospitals and the ~~professional work~~ professional work therein. But for many weighty reasons it is thought ~~advisable that the~~ ~~the~~ Surgeon should as a rule be responsible for correspondence ~~and~~ ~~the~~ ~~the~~ the financial control of institutions, plans for new buildings ~~at~~ ~~the~~

ladies in some of the biggest hospitals, however, have stated that they cannot manage without the Civil Surgeon's help and advice."

Her Excellency the President and the Central Committee feel that the time has come to introduce a rule of greater elasticity. They feel at the same time that it is quite impossible at present to define precisely how a larger measure of independence of the medical officers of Government should be given to medical women generally. Circumstances and conditions vary in different parts of India, and the Provincial Committees are believed to hold varying views upon this question. An arrangement which will suit in one place may not necessarily suit in another. We must allow for all this and so frame the rule of general application that it will admit different systems of management. The desire of Her Excellency and the Central Committee is that really qualified first class medical women should have full professional control of their hospitals and so much independence in management as the local Committee may consider desirable. For other than first class medical women existing arrangements are generally regarded as suitable. I have no doubt that this amendment will give ample scope to first class medical women without imperilling the cause for which the Association exists, and, if I may say so, I think that the Lady Doctors generally owe a great deal of gratitude to Your Excellency for the interest which you have taken in this matter, an interest which, I venture to hope, will soon find expression in practical action in different parts of India.

I move that for Article No. 20 of the Rules and Regulations of the Association, the following be substituted:—

"All persons employed by the Association will ordinarily be expected to act in co-operation with, and where necessary in subordination to, the medical officers of Government."

The Hon'ble Surgeon-General Sir Pardey Lukis said:—Your Excellency,—I have very great pleasure in seconding the amendment brought forward by the Hon'ble Sir Harcourt Butler, and in so doing I wish to associate myself with everything he has said as regards the necessity for giving medical women full control of their hospitals; and I do so not only as a member of the Central Committee, but as the head of the Indian Medical Service. As regards this particular amendment, it appears to me that the objectionable nature of it has been entirely done away with by the removal of the words "as a condition of their employment." There is now no condition of employment depending on co-operation with, or if necessary, subordination to, the medical officers of Government, and I think we are quite justified in asking any medical woman to co-operate with the officers of Government. I wish particularly to draw attention to the fact that in this rule it is expressly stated, not Civil Surgeon, but medical officers of Government. The reason for this will be apparent from what I am going to say now.

I don't think I need say anything very much about co-operation, but I should like to say a few words with reference to the last part, *viz.*, "in subordination to the medical officers of Government." That portion of the rule is intended to meet two very distinct conditions. The first condition arises when certain medical women of the first class are members of the staff of a medical college or school, the principal of which is a male medical officer of Government: I need hardly point out that there can only be one principal of a medical school, or a medical college, and if medical women are attached to the staff of this school or college, it is absolutely essential that so far as the interests of the school or college are concerned, they should act in subordination to the principal. Both Sir Harcourt Butler and I, and I am sure Your Excellency too, look forward to the time when there will be an entirely separate medical college for women, and I do not think I am disclosing secrets if I say that we are already moving in the matter in the hope of arriving at this desirable result in the future.

Again, if medical women of the first class are to have full control of their hospitals and if the Civil Surgeon is to disappear altogether, it is absolutely necessary that there must be some control; and until such time as we are able to appoint female Inspectors-General, these ladies must be subordinate to the Inspector-General of Civil Hospitals in the Province, who will, from time to time, with all due respect to purdah, inspect their hospitals from the financial and the Government point of view.

That is all I wish to say from the point of view of the medical women of the first class: these are the only two conditions under which we consider that she should be subordinate to the medical officers of Government. But if you will read this rule you will see that it mentions all persons employed by the Association,—thus including not only medical women of the first class, but also those of the assistant surgeon and the sub-assistant surgeon grade, and, as all of you know, a considerable number of these ladies are employed, not in independent Dufferin hospitals, but in charge of the female side of the ordinary civil and district hospitals. Where this is the case, it is absolutely essential that they, being themselves in a subordinate position, should be just as much subordinate to the Civil Surgeon, who is the head of the hospital, as the male members of the staff. That is the position, and I maintain, Your Excellency, that the rule as we now propose to amend it meets all the objections that can possibly be raised against it, and I hope therefore that this meeting will be prepared to accept it.

Miss Vaughan then said:—Your Excellency, it seems to me that the great difficulty that there has been all this time in getting suitable women for the work has been due to the clause requiring them to be in subordination to the medical officers of Government. I do not think any medical women have ever asked that those who are not qualified—that is to say, who are

not as well qualified as a Civil Surgeon—should have charge of their hospitals. I know of a good many places where the Civil Surgeon has sole charge of the women's hospital, and all medical women think it is absolutely fatal to the work and fatal to discipline. The only question that has ever been raised by us is that those who are as well qualified as the members of the Indian Medical Service should be allowed to control their own hospitals and up till now that has not been allowed, and in many cases where it has been allowed for some years the woman is either turned out or superseded by an assistant surgeon.

There is a little note on the agenda paper for the next meeting regarding the case of Miss Trewby at Amraoti. The proposal is to supersede her by an assistant surgeon, and there has been trouble for a long time with this Lady Doctor because she has refused to admit the Civil Surgeon to her hospital. I quite admit her attitude is rather irritating for she has always said the Indian women did not like a man coming into her hospital, and has therefore not allowed his visits.

I think women are perfectly right to object to this, and the tendency is, where the woman has sole control, to replace her by somebody who will make no objections to the Civil Surgeon visiting the hospital when he likes. Where there is a medical college or school, of course everybody, all the professors and pupils, whether they are men or women, must act in subordination to the head; that is a reasonable thing; but where the hospital is to be run by a fully qualified woman, I do not see why she should act in subordination to the medical officers of Government. I have just had another complaint from Nagpur; there the hospital was in charge of a Miss O'Brien, a very good and capable woman, and the Civil Surgeon, at the end of her time, allowed her to have her own operations. The Civil Surgeon is changed, and she has gone to take a further degree in surgery. Her substitute, also a fully qualified woman, performed an operation on a woman at the woman's own request the other day. The Civil Surgeon came to the hospital and said the operation should not have been performed at all because it was not done by him and without calling him in. Of course any of us who have worked in most hospitals know that it is not only the Indian women but their husbands who come and say they will not have an operation done unless it is done by the Lady Doctor and another Lady Doctor also gives the chloroform.

I do not see any object in the proposed amendment; all medical women have stood out and asked that the clause requesting them to act in subordination to the medical officers of Government should be removed, and for years and years that has been the reason why one cannot get a good class of English women to come out in any large numbers to the country, and it is also the reason that prevents Indian women taking up medicine; I mean Indian women of a good class. Indian women who take up medicine

are very few and far between, because they do object, and their parents very rightly object to their being employed in hospitals where men have the free entry, and if it were removed, I think we should at once have a better class of Indian women who would take up medicine and who would take a University degree and who would be of the greatest use in looking after their own people.

Then, as the rule stands now, it is very ambiguous. It does not say that Lady Doctors are only to be in subordination to the Civil Surgeon, but to any officer of Government, which may mean any male sub-assistant surgeon; and indeed it is so. The Lady Doctor of Rampore, who was engaged by the State to run the women's hospital, has just left because an Indian State Surgeon with the qualification of the L R C. P. S. of Edinburgh objected very much to having the Lady Doctor independent of him, which was not the case as regards every English Civil Surgeon throughout the country. This was represented to the Nawab, and a resolution was passed that the English Lady Doctor should be subordinate to the surgeon at Rampore. Thereupon she left. In her place they will probably get a woman who has not even had a leaving certificate but is just trained in a little midwifery, and she will probably run that hospital as it has been run a good many years already, and it is certainly in a most unsatisfactory state. I think that these are the reasons why I object to any alteration of the rule unless it be to alter the last part where the women doctors are asked to act in subordination to the medical officers of Government. This, I think, should be removed. I do not think any of the women have ever suggested that an assistant surgeon should be placed in full and sole charge of a women's hospital. To begin with, I myself, and I think most of the women doctors, thoroughly disapprove of thus employing assistant surgeons in full charge. It means that where the people are poor they are given unqualified medical attendance, and I still have the English feeling against it, and I say that they should not be turned over to hospital assistants or to assistant surgeons simply because they are poor; and it seems to me that this is a most important point. It may act very well in the I. M. S., but it does not act well as regards the women.

I may here say that the Bishop of Lucknow wrote a letter telling his Indian Christian congregations that he wished particularly that girls should not enter the Dufferin service, that they should not go into medical work at all, where they were employed in the same places with Indian men without any proper protection; and that is the feeling, that as a rule it is a most difficult thing for any Indian woman to take up the work, because there is this clause that the women are to be in subordination to the men. And, from what I know of things, the Indian sub-assistant surgeon class are wanting in respect to women assistants, and there is an

have said, Surgeon-General Lukis and myself, that we wish Lady Doctors to have independent professional charge of their hospitals, and, where local Committees can arrange it, full professional charge. This is a matter which Her Excellency the President took up when she came out to India, and we have met here to-day in order to record what I consider a very great advance in the direction which the medical women have long been asking for; and which, I think, may prove to give them all that they require. I have reason to believe that very advanced proposals have come up from one province in India already, and they have not yet been laid before the Central Committee. I earnestly ask Miss Vaughan, on behalf of the Lady Doctors of India, not to reject half a loaf because she cannot get the whole. Half a loaf is better than no bread, and I think that in many cases under this amendment the Lady Doctors will get the whole bread. The Central Committee, I think I may say, will never stand in the way of any arrangement which commends itself to Provincial Committees, but we must consider that we have got to make a rule of general application, and it is no use our making a rule which will not be observed by Provincial Committees, or by all Provincial Committees. I do not think I need say anything more. I think that really we are all working for one end, and that it is more a matter of expression than anything else. I would ask the meeting to approve this amendment.

Sir, Charles Lukis has made it quite clear that the condition of employment has gone out, and that, I think, is a very great concession to medical women. He has also made it clear that the medical officers of Government are not the Civil Surgeons, but the Inspectors-General of Civil Hospitals and other heads of institutions to whose control Miss Vaughan, very properly, does not object. If the medical women are not to be in subordination to the Civil Surgeons, I think we may assume that in no case would she be put in subordination to assistant surgeons. I think that follows.

I will now only ask this special meeting to pass this amendment as it stands, and I hope after what I have said that Miss Vaughan will vote with us in this matter. I am sure the objects that we have in view are very much the same.

The Hon'ble Sir Pardey Lukis:—Your Excellency, may I say a few words about what Miss Vaughan said just now on two professional points. First, as regards what Miss Vaughan said about Rampore, where a medical woman was placed under a sub-assistant surgeon. Miss Vaughan says that this is an instance of what may possibly happen under this rule. Now this man is a medical subordinate and is not a medical officer of Government, and if the local people did do that they did it in error.

The other point I wanted to raise was Miss Vaughan's remark about attendance by assistant surgeons as being unqualified attendance. That

is a point to which I must take exception. A large number of the medical women of that class hold the L. M. S., which Miss Vaughan will find, if she will look at the medical register, is a registered qualification.

Miss Vaughan.—I do not think anybody wants this change at all as regards Article 20. Medical women themselves have never asked for this change; they have asked that the objectionable clause "in subordination to the medical officers of Government" should be removed.

Her Excellency.—This rule must be granted considerable latitude. It is not only for first grade Lady Doctors that it was made. As a matter of fact I have received a letter from Dr. Scharlieb in London in which she said that she approved of the words "in harmony with."

Miss Vaughan.—In Simla all the objectionable clauses at the end of the amendment were left out, and it was said at the meeting, which Your Excellency will remember, that the alteration meant a very important and far-reaching change that could not possibly be decided by the Central Committee alone. It was said that there should be a special meeting in Calcutta to make such a great change.

These words were used, and it was on that account that I wrote to Miss Scharlieb and told her of the change. I said there would be no difficulty in getting some qualified women to come out to take up the big posts if the objectionable clause were omitted. The *Pioneer* also gave that impression. No doubt it was wrong. I do not see any great change in the proposed amendment.

Her Excellency.—What is your objection? Is it to the words "where necessary in subordination?" The rules of the Central Committee cannot each be taken separately. All the rules must have a great deal of latitude allowed to them.

Miss Vaughan.—I object to that clause. I think a difficulty is caused by calling everybody a Lady Doctor, whether she is a *dai* or otherwise. In the report it is said that there are 573 Lady Doctors working for the Fund. Of course there have never been that number.

Her Excellency.—That is beside the point.

The motion was then put to the meeting and carried.

On the motion of the Hon'ble Sir Reginald Craddock, seconded by the Hon'ble Mr. Ali Imam, a vote of thanks was passed to Her Excellency Lady Hardinge for presiding, and the meeting terminated.

E. J. BUCK,
Joint Secretary.

7th March 1912.

ANNEXURE II.

Scheme for a Medical College and Hospital for Women, and for a Training School for Nurses at Delhi.

There is at present no Medical College exclusively for women in India. In these circumstances instruction in medical subjects has to be given in mixed classes at men's colleges, with the result that women of the right type will not come forward in sufficient numbers, and that, to obtain the more highly qualified lady practitioners, it is necessary to recruit from England. This is considered a waste of power, and it is desired to remedy this state of affairs by providing in India the necessary machinery for training the women of the country to supply the existing demand for female doctors and nurses.

2. It is therefore proposed to establish at Delhi a College, with its attendant hospital, in which women will be taught by women to attend on women. Delhi has been chosen, first, because it was the scene of *Their Imperial Majesties'* memorable visit to India, and it is desired to ask *Her Imperial Majesty* the Queen-Empress to give her support and name to this part of the undertaking; and, secondly, because, to have a successful College, it is necessary to have in connection with it a well-filled hospital, which is alone possible in a big city. Calcutta, Madras, Bombay, Lucknow and Lahore already have big Medical Colleges and Hospitals. Delhi is still vacant for the purpose.

3. It is also proposed to attach to the College and Hospital, under the same general management, but as a separate institution, the Training School for Nurses, for which *Her Excellency The Lady Hardinge of Penshurst* has already collected, or has been promised, a sum of approximately Rs1,25,000. This Training School will bear *Her Excellency's* name. The supply of trained nurses in India is unequal to the demand. This School is especially intended to train Indian women as nurses and midwives and to send them out to hospitals and dispensaries, where they will be able to work among Indian women. If this should succeed, it is intended, in conjunction with training centres, in the hospitals of other localities throughout India to establish an order of Indian nurses, who with their families (if widows) will be maintained in nurses' homes attached to the hospitals, and will be available for nursing in private families as well as in public institutions.

4. On a rough calculation, and subject to the preparation of detailed plans and estimates, which will be undertaken as soon as it has been ascertained

that the scheme is likely to receive support, it is believed that the initial cost of—

- (1) A College for 100 students ;
- (2) A Hospital with 150 beds ; and
- (3) A Training School, to take in 25 qualified nurses, and the same number of probationers

would be about 15 lakhs of rupees, exclusive of the value of the site occupied. This sum has been arrived at as follows :—

		R
<i>College</i>	1. College buildings (including laboratories, dissecting room, museum, library and lecture room) .	2,75,000
	2. Hostel for students	1,00,000
	3. Quarters for Professors and superior staff	1,00,000
<i>Hospital</i>	4. Hospital Main Buildings	2,50,000
	5. Maternity Wards	50,000
	6. Cottage and Isolation Wards	1,00,000
	7. Out-patient department and dispensary (with arrangements for training compounders)	1,00,000
	8. Laundry, disinfector and dairy	75,000
	9. Compounders and servants	25,000
<i>College and Hospital.</i>	10. Roads, fencing, surface drains, lighting, etc.	3,00,000
<i>Training School for Nurses.</i>	11. Training School for Nurses	1,25,000
TOTAL		15,00,000

5. It is further believed that the annual maintenance charges will amount approximately to one lakh of rupees a year. This calculation is based on the actual expenditure of similar institutions elsewhere.

6. To finance the project there is in hand, or has been promised, the ₹1,25,000 required for the Training School for nurses. For the remaining ₹13,75,000, to build the College and Hospital, it is proposed to make a further appeal to private generosity. For the site and the recurring charge it is intended to approach the Government of India. But before the Government of India are moved, it is desired to obtain, by private effort, from a limited number of individual donors, conditional promises of sums, aggregating not less than 10 lakhs of rupees, to be paid as soon as the Government of India have agreed to assist in the scheme in the manner suggested. It is considered useless to appeal to the general public, until some definite assurance can be given as to the maintenance arrangements, and it will be of no use to ask the Government of India to be responsible for charges on this account, until there is some certainty that the initial expenses will be met by voluntary effort.

7. Further, it is intended to arrange that donors of Rs1,00,000 or over shall be allowed, if they so wish—

- (i) to designate definite buildings or parts of buildings as memorials, and to name them as they may desire;
- (ii) to receive special privileges in the way of accommodation in the College or Hospital for their nominees; and
- (iii) to become Honorary Patrons of the Institution.

It may be possible to concede similar privileges to donors of under Rs1,00,000; but until the details have been further worked out, it is not considered safe to make any promise as to this.

8. Finally it is proposed, as soon as the success of the scheme is assured, to ask Her Imperial Majesty to allow the College and Hospital to be called the Queen Mary Medical College and Hospital for Women, in commemoration of her visit to Delhi, and in token of her gracious interest in the welfare of the women of India.

List of subscribers to Her Excellency Lady Hardinge's Fund for the establishment of a Medical College for Women and Nursing Institute at Delhi.

	R
H. H. the Nizam of Hyderabad	1,00,000
H. H. the Maharaja Scindia	2,00,000
H. H. the Maharaja Holkar	50,000
H. H. the Maharaja of Patiala	1,25,000
H. H. the Maharao of Kotah	1,00,000
H. H. the Begum of Bhopal	30,000
H. H. the Maharaja Gaekwar of Baroda	1,00,000
H. H. the Maharana of Udaipur	1,00,000
The Maharani of Hutwa	1,00,000
H. H. the Maharaja of Jodhpur	1,00,000
H. H. the Maharaja of Jammu and Kashmir	3,500 per annum.
H. M. Wadia Trust	25,000
H. H. the Maharaja of Jaipur	3,00,000
Colonel Smith	500
Other subscriptions	1,00,000
TOTAL	<u>11,31,000</u>

THE COUNTESS OF DUFFERIN'S FUND.

CENTRAL COMMITTEE.

Statements of Accounts for the year 1912.

Account of Receipts and Payments of the Central Committee

RECEIPTS.	Details.	TOTAL.
	<i>R a. p.</i>	<i>R a. p.</i>
Cash Balance on 1st January 1912 . . . . .	... ..	9,470 14 7
<i>Income of Fund—</i>		
Subscriptions and Donations, Life Councillors . . . . .	.....
Donation by Their Excellencies Lord and Lady Hardinge	500 0 0	
Subscriptions and Donations, Life Members . . . . .	.....
Ditto ditto Miscellaneous . . . . .	.....
Contributions from branches	1,501 0 3	
Interest on investments (except Trust Accounts)	32,202 14 0	
Sundry receipts	380 0 0	
		34,583 14 3
<i>Trust Accounts—</i>		
Henry Fawcett Prizes	224 2 8	
Sir Dinshaw Maneckjee Petit	224 2 8	
Sir John Muir	373 10 0	
		821 15 4
Gilchrist Scholarships	4,473 12 7	
Sale-proceeds of investments . . . . .	.....
Repayment by Bhukailas Raj Ward's Estate No. 1 towards loan of Rs3,00,000.	20,000 0 0	
		24,473 12 7
TOTAL . . . . .	.....	69,350 8 9

DELHI :

The 24th February 1913.

M. F. GAUNTLETT,
Comptroller and Auditor-General.

of the Countess of Dufferin's Fund during the year 1912.

PAYMENTS.	Details.	TOTAL.
	R a. p.	R a. p.
<i>Objects of Fund—</i>		
Grants-in-aid, United Provinces Branch	8,550 0 0	
Ditto, Baluchistan Branch	3,888 15 8	
Ditto, Central Provinces Branch	3,200 0 0	
Ditto, Assam Branch	1,140 0 0	
Ditto, Miscellaneous	1,020 0 0	
	17,798 15 8	
<i>Scholarships—</i>		
Central Committee	3,406 8 2	
Gilchrist Trust	2,200 0 0	
Sir Dinshaw Maneckjee Petit	240 0 0	
Sir John Muir	188 0 0	
	6,034 8 2	
Gratuities, including Books and Medals	232 15 6	
English Lady Doctors under Central Committee	5,356 10 8	
Travelling Expenses of Lady Doctors in India	479 1 4	
Henry Fawcett Prizes	"	29,903 3 4
<i>Expenses of Fund—</i>		
Advertisements and Printing	74 4 0	
Telegrams	54 12 0	
Postage and Receipt Stamps	90 1 0	
Salaries and Wages and travelling expenses of Office	4,383 9 0	
Photographs for annual reports		
Office Contingencies and expenses of Meetings	451 2 9	
Commission on realizing interest, etc.	35 4 5	
Office Building		5,089 1 2
<i>Investments—</i>		
Purchase of $3\frac{1}{2}$ % Government Promissory Notes . . . . .	...	24,216 5 11
TOTAL . . . . .	..	59,287 10 5
Cash Balance on 31st December 1912 . . . . .	...	10,143 14 4
TOTAL . . . . .	...	69,350 8 9

B. W. MARLOW, Colonel,
Honorary Treasurer.

Progressive Account of the Central Committee of the Countess

RECEIPTS.	Ledger folio.	Amount.
		R a. p.
<i>Income of Fund—</i>		
Subscriptions and Donations, Life Councillors	13	3,59,000 0 0
Ditto ditto, Life Members	35	1,18,064 2 11
Ditto ditto, Miscellaneous	34	2,54,553 14 6
Contributions from Branches	371	31,701 1 11
Collections in England	29	31,787 1 9
Sundry Receipts	109	1,762 1 6
Interest on Investments (except Trust Accounts)	184	7,27,392 10 2
		15,24,261 0 9
<i>United Kingdom Branch—</i>		
Passage-money allowances	226	598 12 6
<i>Trust Accounts—</i>		
Sir Dinshaw Maneckjee Petit	36	6,415 3 4
Sir John Muir	119	11,122 2 5
Henry Fawcett Prizes	369	9,263 13 11
Gilchrist Scholarships	318	2,210 0 9
		29,011 4 5
TOTAL . . . . .	...	15,53,871 1 8

DELHI :

The 24th February 1913.

M. F. GAUNTLETT,
Comptroller and Auditor-General.

Dufferin's Fund up to the 31st December 1912.

EXPENDITURE.	Ledger folio.	Amount
		£ s. p.
<i>Investments—</i>		
4% Calcutta Municipal Debentures of 1904-05	362	8,221 4 0
4% <i>Ditto</i> <i>ditto</i> of 1903-04	177	22,122 14 11
Loan at 6% to Bengal Court of Wards, Shikarpura Estate	123	1,56,000 0 0
Loan at 6% to Bhikulaab Court of Wards Estate	123	2,50,000 0 0
Loan at 6% to Ghulam Rabbani Court of Wards Estate	123	1,50,000 0 0
2½% Government Promissory Notes of 1900-01	123	24,216 5 11
		6,22,000 0 10
Nett charge on adjustment of former investments	250	28,228 8 5
<i>Objects of Fund—</i>		6,50,272 1 3
Sche'arships	48	72,112 3 9
Grants-in-aid	140	32,707 4 2
<i>Ditto</i> , Bengal Branch	254	43,021 4 8
<i>Ditto</i> , United Provinces Branch	214	2,44,620 2 9
<i>Ditto</i> , Punjab Branch	223	89,603 7 1
<i>Ditto</i> , Assam Branch	143	21,797 4 2
<i>Ditto</i> , Central Provinces Branch	223	32,229 12 11
<i>Ditto</i> , Burma Branch	216	15,764 12 0
<i>Ditto</i> , Berar Branch	216	11,121 17 0
<i>Ditto</i> , Chota Nagpur Branch	216	1,609 9 4
<i>Ditto</i> , Bombay Branch	216	2,229 4 0
<i>Ditto</i> , Madras Branch	216	11,126 12 3
<i>Ditto</i> , Mysore and Coorg Branch	216	1,011 17 0
<i>Ditto</i> , Baluchistan Branch	216	1,011 17 0
<i>Ditto</i> , Karachi Branch	216	1,011 17 0
<i>Ditto</i> , Sindh Branch	216	1,011 17 0
<i>Ditto</i> , Shikarpur Branch	216	1,011 17 0
<i>Ditto</i> , French Malabar and Berar Kanika Branches	216	1,011 17 0
<i>Ditto</i> , Surat Branch	216	1,011 17 0
Gratuities, including Books and Models	216	1,011 17 0
English Lady Doctors under Central Committee	216	1,011 17 0
Travelling expenses of Lady Doctors in India	216	1,011 17 0
<i>United Kingdom Branch—</i>		
Salaries and travelling expenses of Lady Doctors in India	216	1,500 2 9
<i>Expenses of Fund—</i>		1,500 2 9
Advertisements and Printing	216	2,427 21 8
Telegrams	216	2,427 21 8
Postage and Receipts Stamp	216	2,427 21 8
Salaries and Wages and travelling expenses of Office	216	2,427 21 8
Free Contributions and expenses of Meeting	216	2,427 21 8
Permanent Attractions	216	2,427 21 8
Photographs for Annual reports	216	2,427 21 8
Commission on soliciting interest, etc.	216	2,427 21 8
Office Building	216	2,427 21 8
Total		1,500 2 9
<i>Net Balance on 31st December 1912</i>	140	10,122 14 4
TOTAL		11,623 17 3

Investment Account of Central Committee.

	Nominal Value.			Cost.		
	R	a.	p.	R	a.	p.
4 % Calcutta Municipal Debentures, 1904-05	9,000	0	0	8,921	4	0
4 % Ditto, 1903-04	63,000	0	0	68,532	14	11
Loan at 6 % per annum to Bengal Court of Wards, Shakerpura Estate.	1,95,000	0	0	1,96,000	0	0
Loan at 6 % per annum to Bhukailash Court of Wards Estate	2,80,000	0	0	2,80,000	0	0
Loan at 6 % per annum to Ghulam Rabbani Court of Wards Estate	55,000	0	0	55,000	0	0
3½ % Government Promissory Notes of 1900-01	25,000	0	0	24,216	5	11
TOTAL	6,33,000	0	0	6,32,670	8	10

DELHI:

The 24th February 1913.

M. F. GAUNTLETT,
Comptroller and Auditor-General.B. W. MARLOW, Colonel,
Honorary Treasurer.

APPENDIX I.

Students studying in the Provincial Medical Colleges and Schools of Medicine in India.

Medical College, School or Hospital Class.	University Course.	Assistant Surgeon or Medical Practitioner Class.	Hospital Assistant Class.	Midwifery, Nursing or Compounding classes, or attending lectures
Allahabad	7
Agra	64	13
Bombay	14	15	.	26
Calcutta	17	7	13	94
Madras	7	35	19	10
Lahore	3	..	12
Patna	2	...
Burma	42
Hyderabad (Sind)	4
Lucknow	5
Quilon	12
Baroda	7
Mysore	3
Dacca	5	9
Hyderabad (Deccan)	2	2	8
Cuttack	6	3
Benares	4
Patiala	8
Nagpur	9
Tonk	4
Surat	3
Trivandrum	8
Bhopal	24
Karachi	13
Canara	1
Alwar	3
Jampur	4
Bangalore	3
Bettiah	7
Total	38	63	111	346

APPENDIX II.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association.

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).

Assam.

		R		
GOALPARA	Lady Doctor's quarters	1,500	.....	Presented by the Rani of Bijai.
GAUHATI	Female Ward	3,590	.....	Built by Government, Municipality and Local Board.
Do.	Female Sub-Assistant Surgeon's quarters.	900	... ..	Built by Local Board.
JORHAT	Lady Doctor's quarters	1,000	... ..	Ditto.
	TOTAL	6,990		

Baluchistan.

		R		
QUETTA	Lady Sandeman Zenana Dispensary.	9,620	By Municipality and Fund.	
SIDI	MacLvor Hospital and quarters.	1,465	.....	Presented by Sirdar S. Singh, Contractor.
ZIARAT	Female Dispensary and quarters.	5,612	Provincial Revenues and Dispensary Fund.	
PORT SANDERMAN.	Zenana Hospital	7,295	Partly by Bazar Fund.	An additional building presented by Mauladad Khan Nasir in 1910.
	TOTAL	23,992		

Bihar and Orissa.

		R		
BHAGALPUR.	Victoria Memorial	25,000	... ..	Raised by subscription from the public of Bhagalpur as a Memorial to the late Queen.
	Rani Shibtarini Zenana Hospital including the Dhaka and Compounder's quarters.	17,228	.....	The Hospital was presented by Raja Shib Chandra Banerjee and the Dais' and Compounders' quarters by the Bonailli Raj.
GAYA	Lady Elgin Zenana Hospital and Dispensary and 4 Cottage wards.	64,813	.....

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

(Whether Association or not).	Approximate value of same.	HOW OBTAINED		
		Built by Fund.	Presented and by whom (or otherwise)	
Bihar and Orissa—concl'd.				
	<i>R</i>			
	Lady Doctor's residence	10,000	.. ..	Presented by Raja Ram- eswar Prasad Narayan Singh of Malaudpur
MONGHYR	Lady Mackenzie Zenana Hospital.	7,859	.. ..	Presented by Raja Kama- leswar Prasad Singh.
HAZARIBAGH	Female Wards	..	.. ..	The work is carried on in two cottage wards lent by the Committee of the Hazaribagh Civil Hospital
	TOTAL	1,24,900		

Bengal.

		<i>R</i>		
BANKURA	Lady Dufferin Zenana Hospital.	8,274	Built by donation and subscription from the Zamindars, District Board, and Bengal Branch	The land on which the Hospital stands with its compound, was presented by the Bengal Government.
BERHAM-PORE.	Victoria Zenana Hospital.	3,000	Built by subscription and donation. The building was purchased for Rs20,000 by Raja Jogendra Narayan Roy Bahadur of La'gola and presented to the Dispensary	
DACCA	Lady Dufferin Female Hospital Lady Dufferin Victoria Hospital. The Sarnamoyee Hos- tel.	50,000	lected in Benga-	Presented by Man- rani Sarnamoyee as boarding house for fe- male students.
CALCUTTA	Lady Elliott Hostel	25,000	By special sub- scription	
BIRBHUM	Lady Curzon Zenana Hospital.	9,582	By subscription.	The site was presented by Government
DITTO	Mrs Carstairs' Cottage	2,100	Government grant Rs1,000 Mrs Carstairs Rs50	Purchased at a cost of Rs94-1-6. The landlord gave the land free of rent.
KHULNA	Woodburn Hospital, Mrs. Collin's Zenana Cottage.	6,000	Built by donation and Government grant	
MYMENSINGH	Bidyā Moyee Female Hospital.	8,000		Built by Bidya Moyee Debi Chaudhram of Muktagacha
NOAKHALI	Radha Kishore Manjya Female Ward.	10,813	Contributions from Government, District Board, Municipality, public donation and Raja of Hill Tipperah.	
	TOTAL	8,52,017		

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).		Approximate value of same.	HOW OBTAINED.	
			Built by Fund.	Presented and by whom (or otherwise).
Berar.				
AMBAOTI	Female Hospital .	R 34,084	By funds locally collected.	Mr. Sai Bai Mote.
SHEGAON	Female Dispensary .	11,436		
TOTAL		45,520		
Burma.				
RANGOON	Dufferin Maternity Hospital.	R 1,19,538	Voluntary contributions and donations, grant from Local Government, Central Committee, and Rangoon and other Municipalities in Burma.	Site given by the Government of India.
	Quarters for Nurses .	31,968		
	Ditto	8,403		
TOTAL		1,59,909		
Bombay.				
HYDERABAD (SIND).	Women's Hospital including Dais' quarters, dead-house, out-houses and compound wall.	R 27,154	Yes.	The piece of ground on which the Hospital is built was presented over to the Countess of Dufferin's Fund Association here by the Hyderabad Municipality.
KARACHI	Lady Dufferin Hospital, Karachi.	1,00,000	.....	Presented by Mr. K. Dinchand, C.I.E.
	Including the Seth Esardas Asanmal Dispensary.	20,000	.....	Presented by Seth Esardas Asanmal.
	Quarters for Nurses	10,000	.....	Voluntary Contribution of Rs. 5,000 was presented by Dr. K. N. Spencer.
	Karachi City Branch, Female Section, Jaffer Fuddo Dispensary.	10,000	.....	Built by Jaffer Fuddo Dispensary and the Municipality.
SURAT .	Sheth Morarbhai Vijbhukhandas Hospital for Women and Children.	Value of building 29,913 Value of land 22,144	By a grant of Rs. 1,386 by the Local Branch of Countess of Dufferin Fund, Surat.	R A portion of legacy by Sheth Morarbhai Vijbhukhandas . 11,000 By a gift from Bai Dayakar . 37,671 By a gift from Surat Municipality . 2,000

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Association or not.	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).
Bombay—concl'd.			
<i>R</i>			
SHOLAPUR . The Lady Eday Dufferin Hospital, Sholapur.	Not known .	...	Lent for use only free of rent by the Sholapur Municipality.
The Raja Bahadur Narasingji Opera-tion Theatre.	Not known. Work being incomplete.	Yes.	Built on the Municipal ground just close to the Hospital with the donation of Rs.5,000 by Raja Bahadur Narasingji.
Quarters for the Lady Doctor with three out-houses for servants.	3,600	Yes.	Built on Government lands granted at a nominal rent of Rs per annum, vide G. R. No 3856 of 9th April 1911, Revenue Department
House No 8,000/51 near Sadar Bazar Camp, Sholapur.	1,500	..	Presented by Messrs. Cursetji & Sons and A. M. Dalal
SHIKARPUR . Victoria Jubilee Lady Dufferin Hospital	25,000	...	Government.
Bungalow for the residence of the Lady Doctor.	9,972	Yes	
Total	3,53,283		
Central Provinces.			
<i>R</i>			
NAAGPUR . Dufferin Hospital for Women.	30,041	Built with Rs14,523 from Provincial Branch, Rs5,000 from Central Committee, and Rs5,552 from subscriptions.	Subscriptions of Rs13,000 were received from Sir Kastur Chand, & c & c, Rs1,500 from the Nagpur Municipality, Rs2,000 from Rao Bahadur Appaji Bhat towards Hospital Building Fund, and Rs1,366 from Government.
Zenana Ward	4,000	Built by Fund	Subscription of Rs2,500 from Seth Bachraj of Wardha and Rs500 from Manager, Empress Mills.
Quarters for the Resident Medical Officer and Matron	9,063	Ditto.	
JOUNBULPORE Lady Elgin Hospital including the new Hospital Assistant's Quarters.	20,000	..	Raja Gokul Dass.
TOTAL	83,704		

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).		Approximate value of same.	HOW OBTAINED.	
			Built by Fund.	Presented and by whom (or otherwise).
Madras.				
MADRAS	Victoria Hospital for Caste and Gosha Women.	1,00,000	.....	Presented by the Rajah of Venkatagiri, K.C.I.E.
MANGALORE.	Women and Children's Hospital.	6,500	.....	Belongs to the Municipality.
CUDDALORE.	Dispensary for Women and Children.	10,000	... ..	Built by Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.
MATTANCHERRY (COCHIN).	Women and Children's Hospital.	20,000	.....	Built by the Cochin Government.
TRICHUR	Civil Hospital	4,000	.....	Ditto ditto.
NELLORE	Jubilee Hospital	22,000	Built by public subscriptions.	Presented by the Jubilee Committee.
VIZAGAPATAM	Victoria Hospital for Women and Children.	10,000	.....	Presented by Sri Maharaja Gajapati Rao, C.I.E.
BOBBILI	Rajah of Bobbili's Hospital for Women.	5,000	.....	Presented by the late Hon'ble the Rajah of Bobbili, K.C.I.E.
SALEM	Queen Alexandra Hospital for Women and Children.	22,000	.....	Public subscriptions and Government Grant.
VIZIANAGRAM	H. H. the Maharaja Kumarika of Rewa's Caste and Gosha Hospital.	50,000	H. H. the Maharaja Kumarika of Rewa.	Presented by Maharaja Kumarika of Rewa.
BELLARY	Victoria Memorial Women's Hospital.	10,000	V. M. Fund, raised by public subscription.	
TINNEVELLY	Dufferin Female Dispensary, Vannarpet.	25,000	District Board of Tinnevely.	Rs 10,000 contributed by Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.
ADONI	V. M. Women's Dispensary.	14,000	V. M. Fund, raised by public subscriptions.	
CONJEEVERAM.	Women and Children's Dispensary.	12,800	.....	Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.
CALICUT	Women and Children's Hospital.	40,000	... ..	Partly by subscription, chief donor being Sir S. Ramaswamy Mudaliar, K.T., C.I.E., and partly by the Municipality and District Board.
PUDUKOTTAI	Maharaja's Dispensary for Women and Children.	5,000	.....	State buildings. Presented by H. H. the Maharaja of Pudukottai.
COIMBATORE	Female Hospital	1,000	Purchased by the Municipality.	
COCANADA	Lady Havelock Hospital	30,000	By District Board, Godavari.	Rs 5,000 contributed by Mr. Venkatarathnam, Rao Bahadur.
TOTAL		3,87,300		

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise)
Mysore.			
	<i>₹</i>		
MYSORE . Her Highness the Maharani's Hospital.	22,622	.. ..	By Mysore Government and by contribution Ditto.
BANGALORE . Maternity Hospital	23,034	.. ..
KOLAR . Female Hospital and Dispensary.	5,500	Under construction at a cost of about ₹5,500.	
CHIKMAGALUR . Ditto	5,500	Ditto.	
HASSAN . Ditto	4,060	.. ..
MYSORE . Female Dispensary attached to General Hospital	1,500	.. ..
BANGALORE . Female Dispensary attached to City Hospital.	1,500	.. ..
SRINGGA . Female Hospital and Dispensary.	6,000	.. ..
TENKUE . Ditto	5,248	Under construction	
CHITALDROOG . Ditto	.. ..	.. ..
BANGALORE . Lady Carson Hospital for Women and Children.	1,10,000	.. ..	By Government of India and certain native gentlemen in the cantonment.
TOTAL	1,94,964		
N.W. P. Province.			
	<i>₹</i>		
MALAKAND . Lady Minto Swat Hospital.	10,000	Local Fund.	
DERA ISMAIL KHAN . Female Hospital	40,000	.. ..	Subscriptions, District Fund and Municipality.
TOTAL	50,000		
Punjab.			
	<i>₹</i>		
DELHI . Victoria Zenana Hospital.	98,000	.. ..	By local subscriptions.
LAHORE . Lady Aitchison Hospital for Women.	50,000	.....	Assisted by the Punjab Branch, Countess of Dufferin, with a substantial monthly grant.
AMRITSAR . Female Hospital	10,000	.....	Municipality.
JHANG . Female Ward, Civil Hospital.	6,000	.. ..	District Board and Municipality.
LUDHIANA . Female Ward, Civil Hospital.	10,000	.. ..
RAWALPINDI . Female Dispensary and quarters.	14,834	.. ..	Municipality.
TOTAL	2,18,834		

Statement showing value and particulars of buildings belonging to, or engaged in
furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.		
		Built by Fund.	Presented and by whom (or otherwise).	
<p style="text-align: center;">United Provinces of Agra and Oudh.</p> <p style="text-align: center;"><i>R</i></p>				
AGRA . .	Lady Lyall Hospital	1,27,603	Yes.	
	Maternity . .	35,700	Yes.	
	Nurses' Quarters . .	29,095	Yes.	
	Lady Doctor's Quarters	35,299	Yes.	
	Hostel for Female Students.	18,000	Yes.	
	Ferozabad Female Dispensary.	6,051	.....	Ferozabad Municipality.
	Pipalmandi Female Dispensary.	.....	.....	On rent paid by the Agra Municipality.
	Tajgunj Female Dispensary.			
ALIGARH . .	Dufferin Hospital . .	53,764	Yes.	Rupees 35,982 contributed by Bani Khual Kuar Sahiba of Barquli, District Aligarh.
ALLAHABAD . .	Ditto . .	71,543	.....	All paid by Provincial Government.
BAHBAICH . .	Lady Doctor's Quarters	19,000	.....
BARA BANKI . .	Dufferin Hospital . .	32,379	Yes.	
	Grigg Female Hospital.	3,000	.....	Presented by Poor House Committee and District Board.
	Lady Doctor's Quarters	3,000	.....	Built by late Rai Narain Bah Bahadur, Taluqdar of Daryabad.
	Maila Raiganj Ward . .	1,900	.....	Presented by Shaikh Naushad Ali Khan, Taluqdar of Mail Raiganj.
	Operating Room . .	1,345	Yes.	
	Pardahnashin Ward and Chaunkidars Quarters.	4,163	.....	Built from funds provided by Government.
RAHEILLY . .	Dufferin Hospital . .	56,354	Yes.	Rupees 13,430 being contributed by the District Board.
BENARES . .	Ishwari Memorial Hospital.	1,61,381	.....	Built from subscriptions and Government grants.
BIJNOR . .	Female Hospital . .	11,525	Yes.	
NAGINA . .	Ditto . .	5,644	Yes.	
BADAUN . .	Ditto . .	11,152	Yes.	A contribution being made by the Municipality.
CAWNPORE . .	Dufferin Hospital . .	40,819	Yes.	
	Maternity Ward . .	7,584	.....	By subscriptions especially collected for the purpose.
	Nurses' Quarters . .	4,410	.....	Presented by Lala Bishambar Nath.
	Dais' . .	1,077	.....	By Victoria Memorial Fund.
	Female Sub-Assistant Surgeon's Quarters.	1,864	Yes.	
	Female Compounder's Quarters.	1,578	.....	By Government grant.
	Two Servants' Quarters	1,044	Yes.	

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).		Approximate value of same	HOW OBTAINED.	
			Built by Fund	Presented and by whom (or otherwise).
United Provinces of Agra and Oudh—concl'd.				
<i>R</i>				
FARRUKHABAD	Dufferin Hospital	22,499	Yes.	The Compounders' Quarters were formerly part of the Sadr Dispensary, but were made over to the Fund on the establishment of a branch at Farrukhabad.
	Operation Room and equipment for same	3,000		Donation by B. Bharat Indu.
FYZABAD	Dufferin Hospital	5,000	Yes	
GHAZIPUR	Female " "	17,960	...	Built from Municipal contribution and local subscriptions.
GONDA	Dufferin " "	3,751	Yes	
	May Barrow " "	3,540	...	Presented by Mrs. Pannolof Isle of Wight.
		1,031	...	By grant-in-aid from Government
.				
LUCKNOW	Ditto	64,468	Yes	
	Quinton Memorial Wing	15,163	..	Presented by Quinton Memorial Fund
MIRZUT.	Dufferin Hospital	75,500	From private	Presented by District Board
MIRZAPUR	Six patients' Wards		donations	
	Jubilee Hospital	15,526	..	Jubilee Hospital Fund, Mirzapur
	Eye Ward, Hospital, Assistant's and Compounder's quarters.	8,940	Yes.	Chiefly from a contribution made by the Provincial Branch.
PARTABGARH	Dufferin Hospital	25,269	..	Presented by Rani Raghuraj Koor of Partabgarh.
	Enclosure wall	5,712	...	Built from a Government grant
PILIBHIT	Dufferin Hospital	14,225	Purchased by Fund	
RAR BARELI	Ditto	8,962	Yes.	
.				
SAHARANPUR	Ditto	31,664	Yes.	A contribution was made by the late Sri Shanker Bakesh Singh, K.C.I.E., of Khajurgaon. Rupees 3,500 grant given by Government for Police Hospital building and Rs. 595 donation from Government for improvement.
.				
SHANJAHANPUR.	Ditto	14,588	...	
	Singhari Female Hospital.	10,000	..	Presented by Lala Parmanand of Farrukhabad.
SITAPUR	Dufferin Hospital	48,344	....	Built from subscription.
TOTAL		11,82,626		

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).

Native States.

R

BETTIAH	Dufferin Hospital	84,884	.....	Bettiah Raj.
DARBHANGA	Ditto	33,000	.....	Darbhangra Raj.
SANGRUR,	Victoria Female Hos-	20,000	.....	Jhind Durbar.
JHIND.	pital.			
BHOPAL	Lausdowne Hospital	60,392	.....	By the past and present
	and Lady Minto Nurs-			Begums of Bhopal.
	ing School and Hostel			
	for Girls.			
KAPURTHALA	Victoria Jubilee Hospi-	9,588	... ..	By H. H. the Maharaja
	tal for Women.			of Kapurthala.
KOTAH	Victoria Jubilee Hospi-	65,440	.....	By H. H. the Maharana
	tal and Female Dis-			of Kotah.
	pensary.			
ODDEYPORE	Walter Zenana Hospital	27,003	.....	By H. H. the Maharana
				of Oodeypore.
ULWAR	Lady Dufferin Hospital	27,000	.....	} By H. H. the Maharaja
	Lady Elgin Wards for		.....
	Pardah-nashins.		.....	of Ulwar.
GWALIOR	Memorial Hospital for	2,56,000	.....	By the State.
	Women and Children.			
SRINAGAR	Diamond Jubilee Zenana	41,671	.....	Ditto.
	Hospital.			
REWAH	Zenana Hospital and	4,500	.....	Ditto.
	Quarters for Hospital			
	Staff.			
PATIALA	Lady Dufferin Hospital	50,000	.....	His Highness the late
				Maharaja.
	Hendley Female Dis-	5,241	.....	The late Council of Re-
	pensary.			gency.
	Lady Curzon School for	24,280	.....	Ditto ditto.
	the training of nurses,			
	etc.			
RAMPUR	Zenana Hospital and	17,000	.....	By the State.
	Dispensary.			
TONE	Walter Female Hospital	19,500	.....	By H. H. the Nawab of
				Tonk.
BAHAWALPUR	Jubilee Female Hospital	50,000	.....	By H. H. the Nawab of
				Bahawalpur.
BIKANIE	Women's Wards of the	8,385	.....	By Rai Bahadur Seth
	Bhagwan Dass Hospi-			Bhagwan Dass Bagla of
	tal.			Churu.
JODHPUR	Jaswant Hospital for	50,000	.....	By H. H. the Maharaja
	Women.			of Jodhpur.
BHARATPUR	Maji Sahiba Darya	37,524	.....	By H. H. the Maharaja
	Kuar's Female Dis-			of Bharatpur.
	pensary			
RAJKOT	Basulkanji Hospital for	80,000	... ..	By H. H. the Nawab
	Women and Children.			Sahib of Junagadh.
TRIVANDRUM	Female Ward, General	32,374	.....
	Hospital, and Nurses'			
	quarters.			
	Maternity and Women	47,377	.....
	and Children's Hospi-			
	tal.			

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*concl'd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund	Presented and by whom (or otherwise).
Native States—concl'd.			
	<i>R</i>		
	Victoria Jubilee Hospital, Quilon.	10,783	...
	Female Ward, Alepey Hospital.	3,590	...
JAOHA	Victoria Dufferin Hospital.	20,000	By the State
BEJWAR	Female Ward, Charitable Dispensary.	3,700	District Board and Municipality.
BARODA	Victoria Jubilee Ward.	28,527	By H. H. the Gaekwar's Government
	Jamnabai Dispensary.	1,55,922	Ditto ditto
NAHAN	Zenana Hospital.	12,643	By H. H. the Maharaja of Sirmoor, & c & c.
HYDERABAD (Deccan)	Victoria Women's Hospital, Hyderabad	3,70,504	By the State.
	Female Hospital, Gulburga.	9,135	Rs. 6,000 from the Bani Janka Bai of Saraspatti; balance by the State.
	Zenana Ward, Raichur	7,000	By Local Fund.
	TOTAL	16,86,624	

Abstract.

	<i>Rs</i>
Native States	16,86,624
United Provinces of Agra and Oudh	11,82,626
Bengal	8,32,017
Madras	3,87,300
Bombay	2,59,253
Mysore	1,94,964
Punjab	2,18,834
Burma	1,50,909
Central Provinces	83,704
Berar	45,520
Baluchistan	23,002
Assam	6,300
N.-W. F. Province	50,000
Bihar and Orissa	1,24,960
Total value of buildings	52,57,463

APPENDIX III.

Return of Patients treated in Hospitals for Women in India.

The following returns of patients treated are divided into three classes, viz. :—

Class A.—Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund.

„ B.—In Female Hospitals assisted by the Dufferin Fund.

„ C.—Native States (which now include the statistics returned by the Mysore Branch).

Assam.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			TOTAL.	REMARKS.
		In.	Out.			
			Treated in hospital.	Treated at home.		
Sylhet . .	Charitable Dispensary . .	60	2,583	47	2,690	
Sunamganj . .	Ditto . .	7	1,894	106	2,007	
Goalpara . .	Ditto . .	9	1,495	44	1,548	
Dhubri . .	Female Ward . .	61	1,665	not available	1,726	
Gauhati . .	Charitable Dispensary . .	86	2,777	103	2,966	
Barpeta . .	Ditto . .	...	...	10	10	
Tezpur . .	Ditto . .	55	2,504	35	2,594	
Jorhat . .	Ditto . .	47	15,240	130	15,417	
Sibsagar . .	Ditto . .	...	...	26	26	
Tura . .	Tura Dispensary . .	...	...	36	36	
Aijal . .	Aijal „ . .	...	...	23	23	
Silchar . .	Charitable „ . .	47	3,378	25	3,450	
	TOTAL . .	372	31,536	585	32,493	

Baluchistan.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			TOTAL.	REMARKS
		In.	Out.			
			Treated in hospital	Treated at home		
Quetta	Dufferin Zenana Hospital	74	4,275	40	4,389	* Returns not kept separately of out patients They are merged in those of Civil Hospital
Sibi	McIvor Female Dispensary.	63	4,146	51	4,260	
Fort Sandeman	Lady Dufferin Zenana Hospital.	47	5,126	17	5,190	
Quetta	Patel Ward in the Civil Hospital	251	*	.	251	
TOTAL		435	13,547	108	14,090	

Bengal.

Return of Patients treated in Female Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			TOTAL	REMARKS.
		In.	Out.			
			Treated in hospital	Treated at home.		
Calcutta	Lady Dufferin Victoria Hospital.	1,450	7,511	..	8,961	
Dacca	Lady Dufferin Female Hospital.	65	5,526	126	5,717	
	TOTAL	1,515	13,037	126	14,678	

Bengal—*conold.*

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B—*conold.*

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			TOTAL.	REMARKS.
		In.	Out.			
			Treated in hospital.	Treated at home.		
	Brought forward	1,223	42,651	607	44,551	
Faridpur	Madaripore Charitable Dispensary.	13	56		69	
Mymensing	Bidya Moyee Female Hospital.	200	3,540	401	4,141	
Noakhali	Radha Kishore Manukya Female Hospital, attached to the Sadar Hospital.	12	1,782	43	1,837	
Ditto	Female Ward attached to the Feni Dispensary.	..		5	5	Work commenced from 1-9-12
Ditto	Female Ward attached to the Harriapur Dispensary (Sandrip).	..		15	15	
Pabna	Hemangini Debi Female Hospital attached to the Pabna Sadar Hospital.	86	2,030	201	2,317	
Rangpore	Kundi Dispensary	..	917	13	930	For 5 months only
Tipperah	Fazlunnessa Zenana Hospital, Comilla	18	6,187	147	6,392	
	TOTAL	1,622	57,113	1,432	60,167	

Berar.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Amraoti . . .	The Amraoti Female Hospital.	233	5,714	56	6,003
Ellichpur City . .	Female Ward Charitable Dispensary.	2	...	42	44
Chandur Bazar . .	Ditto . . .	...	...	53	53
Daryapur . . .	Ditto . . .	...	...	18	18
Anjangaon . . .	Ditto . . .	...	...	25	25
Morsi . . .	Ditto . . .	...	...	63	63
Chandur Railway . .	Ditto . . .	...	...	91	91
Akola . . .	Ditto . . .	...	6	78	84
Basein . . .	Ditto . . .	1	...	130	131
Buldana . . .	Female Ward of Civil Hospital.	...	...	31	31
Khamgaon . . .	Female Ward of Charitable Dispensary.	...	...	53	53
Mehkar . . .	Ditto . . .	...	...	9	9
Yeotmal . . .	Female Ward of Civil Hospital.	...	...	46	46
Darwaha . . .	Female Ward of Charitable Dispensary.	...	...	36	36
Pusad . . .	Ditto . . .	1	...	13	14
Digras . . .	Ditto . . .	...	...	34	34
Jalgaon . . .	Ditto . . .	7	...	27	34
Deoolgaon Raja . .	Ditto . . .	...	...	10	10
Akote . . .	Ditto . . .	...	...	46	46
Karanja . . .	Ditto . . .	...	...	45	45
	TOTAL . . .	244	5,720	906	6,870

Bihar and Orissa.

Return of Patients treated in Female Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912				
		In.	Out.		TOTAL	REMARKS.
			Treated in hospital	Treated at home		
Bagalpur . .	Rani Shibbari Victoria Memorial Hospital.	187	4,368	141	4,696	The hospital was practically closed for nearly 6 months on account of the prevalence of plague in the station
Laya . .	Lady Elgin Zenana Hospital.	399	5,300	488	6,247	
	TOTAL .	586	9,728	629	10,943	

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.				
		In.	Out.		TOTAL	REMARKS.
			Treated in hospital.	Treated at home.		
Monghyr . .	Charitable Dispensary, Monghyr.	...	3,630	182	3,812	
Mazariabagh. .	Lady Dufferin Hospital .	20	3,229	146	3,365	
	TOTAL .	20	6,859	328	7,207	

Bombay.

Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Hyderabad (Sind)	Women's Hospital	692	8,476	25	9,193
Katara	Civil Hospital	5	...	24	29
	TOTAL	697	8,476	49	9,222

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Bolgaum	Civil Hospital	245	1,178	15	1,438
Dhulia	Municipal Dispensary	...	4,098	11	5,009
Karachi	Lady Dufferin Hospital, including Sardar Asanmal Dispensary.	695	14,193	51	14,944
	Female Sutar Jaffer Fuddo Dispensary.	...	14,913	...	14,913
Kapadvanj	Female Dispensary	...	4	15	19
Kaira	Civil Hospital, Kaira.	...	...	3	3
Poona City	K. B. P. S. Charitable Dispensary.	23	...	115	138
Godhra	Panch Mahals and Rowakantha.	...	78	344	422
Sholapur	Lady Reay Dufferin Hospital.	195	6,635	30	6,860
	TOTAL	1,158	42,004	584	43,746

Burma.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

- CLASS B.

STATION.	NAME OF HOSPITAL	PATIENTS TREATED IN 1912.			
		In.	Out.		TOTAL
			Treated in hospital	Treated at home	
Rangoon . . .	Lady Dufferin Maternity Hospital	678	16,232	..	16,960
	TOTAL	678	16,232	..	16,960

Central Provinces.

Return of Patients treated in Female Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912			
		In	Out		TOTAL
			Treated in hospital	Treated at home	
Nagpur . . .	Dufferin Hospital	646	9,303	30	9,979
Jubbulpore . .	Elgin Hospital	225	4,580	320	5,425
	TOTAL	871	14,183	350	15,404

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912			
		In.	Out		TOTAL
			Treated in hospital	Treated at home	
Saugor . . .	Main Dispensary	75	2,903	300	3,278
	TOTAL	75	2,903	300	3,278

Madras.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Madras . .	Victoria Hospital for Caste and Gosha Women.	2,587	15,887	...	18,474
	TOTAL .	2,587	15,887	...	18,474

North-West Frontier Province.

Return of Patients treated in Female Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Kohat City .	Female Hospital . .	176	39,050	661	39,887
Dera Ismail Khan	Ditto . .	198	2,710	...	2,908
Peshawar . .	No. III Female Dispensary.	...	14,258	26	14,284
	TOTAL .	374	56,018	687	57,079

Malakand.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out		TOTAL.
			Treated in hospital.	Treated at home	
Malakand	Lady Minto Swat Hospital.	194	2,714		2,908
	TOTAL	194	2,714		2,908

Punjab.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out		TOTAL.
			Treated in hospital.	Treated at home.	
Gujrat	Female Out-door Department of Civil Hospital.		13,094	53	13,147
Lahore	Lady Aitchison Hospital	636	11,545	...	12,181
Simla	Dufferin Ward, Ripon Hospital.	235	4,000	30	4,265
	TOTAL	871	28,639	83	

United Provinces of Agra and Oudh.

Patients treated in Hospitals which are mainly controlled and aided by the
Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Ont.		TOTAL.
			Treated in hospital.	Treated at home.	
Agra . .	Lady Lyall Hospital . .	1,045	...	..	1,045
Do. . .	Maternity Hospital. . .	638	...	...	638
Do. . .	Lady Lyall Dispensary . .	...	11,369	...	11,369
Aligarh . .	Dufferin Hospital . . .	620	6,790	82	7,492
Allahabad . .	Ditto . . .	583	8,969	248	9,800
Bahraich . .	Ditto . . .	306	12,930	398	13,634
Bara Banki . .	Grigg Female Hospital . .	284	8,685	73	9,042
Bareilly . .	Dufferin Hospital . . .	667	11,310	387	12,364
Benares . .	Ishwari Memorial Hos- pital. . .	1,061	14,809	...	15,870
Bijnor . .	Mrs. Markham's Female Hospital. . .	106	6,414	90	6,610
Do. (Nagina)	Female Hospital . . .	74	4,301	31	4,409
Budann . .	Ditto . . .	304	12,416	123	12,848
Cawnpore . .	Dufferin Hospital . . .	447	10,769	72	11,288
Farrukhabad . .	Ditto . . .	154	4,099	52	4,305
Fyzabad . .	Ditto . . .	368	9,868	212	10,448
Gonda . .	Ditto . . .	210	7,196	48	7,454
Do. . .	Mary Barrow Purdah Ward. . .	17	..	...	17
Ghazipur . .	Female Hospital . . .	384	6,097	71	6,552
Gorakhpur . .	Zenana Hospital . . .	431	7,183	141	7,755
Kheri . .	Dufferin Hospital . . .	163	3,115	50	3,328
Lucknow . .	Ditto . . .	1,027	10,226	...	11,253
Meerut . .	Ditto . . .	454	11,677	...	12,131
Mirzapur . .	Ditto . . .	221	6,514	140	6,875
Partabgarh . .	Rani Ragburaj Kuar Dufferin Hospital. . .	145	3,980	32	4,107
Pilibhit . .	Dufferin Hospital . . .	163	3,904	37	4,104
Rae Bareli . .	Ditto . . .	194	5,216	130	5,540
Saharanpur . .	Ditto . . .	225	7,793	150	8,168
Shahjehanpur . .	Ditto . . .	320	8,837	230	9,387
Sitapur . .	Ditto . . .	323	5,634	...	5,957
	TOTAL . .	10,934	210,051	2,805	223,790

United Provinces of Agra and Oudh—*concd.*

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Agra . . .	Pigalmandi Dispensary . . .	.	7,209	70	7,269
Do. . .	Tajganj Dispensary . . .	..	4,573	33	4,611
Do. . .	Ferozabad Dispensary . . .	.	6,220	72	6,292
Azamgarh . . .	Female Hospital . . .	173	5,071	16	5,203
Benares . . .	Bhulapur Hospital . . .	.	7,876		7,876
Bulandshahr . . .	Lady Porter's Hospital . . .	387	4,051	64	4,502
Dehra Dun . . .	Female Hospital . . .	110	6,737	491	7,338
Etawah . . .	Ditto . . .	61	3,523	55	3,642
Fatehpur . . .	Mrs. Rustamji's Dufferin Hospital . . .	149	2,637	17	2,803
Hardoi . . .	Female Dispensary . . .	70	3,065	73	3,208
Do. (Sandila). . .	Ditto . . .	8	3,976	53	4,037
Hamirpur . . .	Female Hospital . . .	71	2,675		2,746
Malupuri . . .	Female Dispensary . . .	194	5,812	200	6,206
Moradabad . . .	Victoria Hospital . . .	556	12,276	64	12,936
Do. (Amroha) . . .	Female Dispensary . . .	68	7,009	54	8,031
Mattia . . .	Female Hospital . . .	76	5,506	24	5,706
Muzaffarnagar . . .	Ditto . . .	304	3,091	21	4,216
Naini Tal . . .	Crosthwaite Hospital . . .	147	6,113	564	6,824
Oral . . .	Female Hospital . . .	53	5,515	39	5,627
Sultanpur . . .	Amuthi Hospital . . .	93	2,769	60	3,022
	TOTAL . . .	2,423	108,789	2,000	113,212

United Provinces of Agra and Oudh.

Patients treated in Hospitals which are mainly controlled and aided by the
Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Agra . .	Lady Lyall Hospital . .	1,045	...	..	1,045
Do. . .	Maternity Hospital. . .	638	...	...	638
Do. . .	Lady Lyall Dispensary . .	...	11,369	...	11,369
Aligarh . .	Dufferin Hospital . .	620	6,799	82	7,492
Allahabad . .	Ditto . .	583	8,969	218	9,800
Bahraich . .	Ditto . .	306	12,939	398	13,634
Bara Banki . .	Grigg Female Hospital . .	284	8,685	73	9,042
Barcilly . .	Dufferin Hospital . .	667	11,310	387	12,364
Benares . .	Ishwari Memorial Hos- pital.	1,061	14,809	...	15,870
Bijnor . .	Mrs. Markham's Female Hospital.	106	6,414	90	6,610
Do. (Nagina)	Female Hospital . .	74	4,301	31	4,409
Budaun . .	Ditto . .	304	12,416	123	12,848
Cawnpore . .	Dufferin Hospital . .	447	10,769	72	11,288
Farrukhabad . .	Ditto . .	154	4,099	52	4,305
Fyzabad . .	Ditto . .	368	9,868	212	10,448
Gonda . .	Ditto . .	210	7,196	48	7,454
Do. . .	Mary Barrow Purdah Ward.	17	..	...	17
Ghazipur . .	Female Hospital . .	384	6,097	71	6,552
Gorakhpur . .	Zemana Hospital . .	431	7,183	141	7,755
Kheri . .	Dufferin Hospital . .	163	3,115	50	3,328
Lucknow . .	Ditto . .	1,027	10,226	...	11,253
Meerut . .	Ditto . .	454	11,677	...	12,131
Mirzapur . .	Ditto . .	221	6,514	140	6,875
Partabgarh . .	Rani Raghuraj Kuar Dufferin Hospital.	145	3,980	32	4,107
Pilibhit . .	Dufferin Hospital . .	163	3,904	37	4,104
Rae Bareilly . .	Ditto . .	194	5,216	130	5,540
Saharapur . .	Ditto . .	225	7,793	150	8,168
Shahjehanpur . .	Ditto . .	320	8,837	239	9,387
Sitapur . .	Ditto . .	323	5,634	...	5,957
	TOTAL . .	10,934	210,051	2,805	223,790

United Provinces of Agra and Oudh—*conold.*

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Agra . .	Pipalmandi Dispensary .		7,299	70	7,369
Do. . .	Tajganj Dispensary .	..	4,578	33	4,611
Do. . .	Ferozabad Dispensary .	.	6,220	72	6,292
Azamgarh .	Female Hospital . .	173	5,071	16	5,200
Benares .	Bhulapur Hospital . .	..	7,876		7,876
Bulandshahr .	Lady Porter's Hospital .	387	4,051	64	4,502
Dohra Dun .	Female Hospital . .	110	6,737	491	7,338
Etawah . .	Ditto . .	64	3,523	55	3,642
Fatehpur .	Mrs. Rustamji's Dufferin Hospital.	149	2,637	17	2,803
Hardoi . .	Female Dispensary .	70	3,065	73	3,208
Do (Sandila).	Ditto . .	8	3,970	53	4,037
Hamirpur .	Female Hospital . .	71	2,675		2,746
Mainpuri .	Female Dispensary . .	194	5,812	200	6,206
Moradabad .	Victoria Hospital . .	556	12,376	64	12,996
Do. (Amroha)	Female Dispensary . .	68	7,993	54	8,031
Muttra . .	Female Hospital . .	70	5,596	24	5,706
Muzaffarnagar .	Ditto . .	204	3,091	21	4,216
Naini Tal .	Crosthwaite Hospital .	117	6,113	564	6,824
Orai . . .	Female Hospital . .	53	5,515	19	5,627
Sultanpur .	Amathi Hospital . .	93	3,769	69	3,922
TOTAL		2,423	1,6739	2,669	113,212

Native States (which now include the statistics returned by the Mysore Branch).

CLASS C.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1912.				REMARKS.
		In.	Out.		TOTAL.	
			Treated in hospital.	Treated at home.		
Ulwar . .	Lady Dufferin Hospital . .	417	13,572	704	14,693	
Oodeypur . .	Walter Hospital . .	114	2,837	47	2,998	
Kotah . .	Victoria Jubilee Hospital . .	171	8,881	98	9,150	
Bharatpur . .	Maji Sahiba Darya Kaur's Female Hospital.	280	6,429	25	6,734	
Bikanir . .	Main Dispensary, Bhugwands Hospital.	139	5,662	157	5,958	
Jodhpore . .	Jaswant Hospital . .	71	3,238	40	3,349	
Jeypur . .	Zenana Wards, Mayo Hospital.	731	13,984	96	14,811	
Tonk . .	Walter Female Hospital . .	219	7,812	375	8,406	
Beawar . .	Female Hospital . .	41	9,581	145	9,770	
Gwalior . .	Scindia's Hospital for Women and Children.	1,308	28,641	...	29,949	
Rewah . .	Zenana Hospital . .	40	7,794	...	7,834	
Baroda . .	Jamnabai Hospital . .	...	14,255	...	14,255	
Ditto . .	Jubilee Wards . .	243	...	...	243	
Nahan . .	Zenana Hospital . .	77	3,620	76	3,773	
Kapurthala . .	Victoria Jubilee Hospital . .	291	30,167	...	30,458	
Patiala . .	Lady Dufferin Hospital and City Branch.	521	13,384	...	13,905	
Jhind . .	Victoria Female Hospital, Sangrur.	51	5,620	49	5,620	
Bhopal . .	Lady Lansdowne Zenana Hospital.	356	5,088	2,008	7,452	
Bahawalpur . .	Jubilee Female Hospital . .	300	9,543	401	10,244	
Hyderabad . .	Victoria Female Hospital . .	1,570	9,105	...	10,675	
Ditto . .	Suburban Dispensary . .	101	7,308	...	7,409	
Ditto . .	Hanamkonda Dispensary . .	16	1,189	...	1,205	
Ditto . .	Aurangabad Dispensary . .	27	3,004	...	3,031	
Ditto . .	Rani Chellam Jankiba . .	12	1,971	4	1,987	
Ditto . .	Jalna Dispensary . .	7	826	...	833	
	Carried over . .	7,103	213,411	4,228	224,742	

Native States (which now include the statistics returned by the
Mysore Branch)—*concl'd.*CLASS C—*concl'd.*

		PATIENTS TREATED IN 1912.				
STATION.	NAME OF HOSPITAL.	In.	Out.		TOTAL	REMARKS.
			Treated in hospital.	Treated at home.		
	Brought forward	7,103	213,411	4,328	224,742	
Trivandrum	Combined Maternity and Women and Children's Hospital.	1,712	9,017		10,729	Travan- core State.
Ditto	Female side, General Hos- pital.	11,568	19,164	..	30,432	
Qallan	Victoria Jubilee Hospital	681	8,330	357	9,969	
Alleppey	Female side, District Hos- pital.	1	3,644	8	3,653	Cochin State
Kottayam	Ditto		881		881	
Mattanchery	Women and Children's Hos- pital.	1,180	16,608	825	18,673	
Ernakulam	General Hospital Female side		20,349	60	20,409	Cochin State
Trichur	Trichur Hospital, Female side		13,973	231	14,203	
Rajkote	Basul Khanji Hospital for Women and Children.	227	1,909	..	2,136	
Jaora	Victoria Zenana Hospital	61	7,070		7,131	
Brinsgar	Diamond Jubilee Zenana Hospital.	563	3,236	414	10,295	
Bettiah	Dufferin Hospital	1,066	13,263	24	15,353	
Darbhanga	Ditto	590	41,267	129	42,006	
Rampur	Zenana Hospital	141	3,799	..	3,940	
Bogra	Ditto	..	4,603	199	4,802	
Bangalore	Victoria Hospital, Female Department	823	36,988		37,811	
Ditto	Maternity Hospital	778	14,083	25	14,886	
Ditto	Lady Curson Hospital	1,733	15,726	..	17,459	
Mysore	General Hospital, Female Department.	..	20,501	..	20,501	
Ditto	H. H. The Maharani's Hos- pital.	673	12,315	111	13,099	
Kolar	Gold Fields Female Dis- pensary.	174	9,973	28	10,180	
Ditto	Female Dispensary	4	13,861	25	13,900	
Chickballapur	Ditto	5	8,293	23	8,319	
Tumkur	Ditto	23	7,429	23	7,475	
Haasan	Ditto	14	18,211	50	18,275	
Shimoga	Ditto	..	12,722	593	14,309	
Bager	Ditto	..	3,363	41	3,404	
Kadur District, Chickmagalur.	Ditto	52	16,357	..	16,409	
Chitaldrug	Ditto	..	7,692	150	7,842	
Total		28,695	580,890	7,529	617,314	

APPENDIX IV.

Summaries of Reports of Certain Branches and Native States.

Baluchistan Branch.

Quetta.—The report submitted by Miss E. M. Cardozo, L.B.C.P. & S., the Lady Doctor in charge of the Dufferin Hospital, runs as follows:—"During the year under report the work in the Zenana Hospital has increased in every branch. There were 74 in-patients, against 62.

The number would have been considerably higher if the accommodation had been more, and better. The present accommodation is limited to three wards, with two beds in each. These rooms are ill-ventilated, and are very hot and uncomfortable from June to August. In the cold months, from November till March, they are cold and draughty, and patients refuse to live in them, and they run away after a couple of days or so.

The number of old and new out-patients treated was 17,557, against 15,361, an increase of 2,196.

The number of patients treated in their own homes was 40, and the total number of visits paid to these was 529. There were 125 operations performed, against 97, and 17 confinements were attended, against 9 last year.

Hitherto, Miss Stiffle, a private trained nurse, did the duties of Matron, Compounder and Chloroformist, but these combined duties have become too heavy for one person, and, thanks to the kindness of Rai Bahadur Diwan Jamait Rai, sufficient money has been collected for the training of a female compounder on Rs15 a month."

The total number of women and children treated in the Patel Ward of the Civil Hospital, Quetta, was 251 from December 1st, 1911, to November 30th, 1912. Of the above number, 14 were maternity cases.

Sibi.—As regards the McIvor Female Dispensary, Miss A. Alfred, L.M.S., reports that:—"The total number of new patients treated during the year is 4,273, including 63 in-patients, against 3,141, including 48 in-door. The increase of 1,132 cases was due to the year being a malarious one, also that village visiting was done this year, where about 305 new patients were treated; 239 cases of diseases peculiar to women were treated, against 196: this includes 53 midwifery cases, out of which 8 were normal labour cases and 5 abnormal, against 38 midwifery cases, 12 normal and 1 abnormal, in 1911. One labour case was treated as an in-patient at the Ziarat Hospital, there being no in-door ward at Sibi; 35 cases with fees and 17 without were treated at their homes; 182 operations were done, most of them being minor.

The hospital continues to be well attended by all classes of women, purdah-nashin or otherwise, most of the patients being poor, local Mohammadan women.

The Political Agent, Mr. Dobbs, very kindly sanctioned the entertainment of a Dresser, but as funds were low, it was considered advisable not to engage one at present.

This much-needed help, together with an in-door ward for the Sibi Hospital, we look to the Political Agent, Major Ramsay, and Diwan Ganpat Rai, Extra Assistant Commissioner, Sibi, who have done much to improve the institution, to kindly provide for in the coming year.

My gratitude is due to the Lady President and to the Central Committee for continuing the grant towards my salary and to Major Ramsay for increasing it.

s. Archer, Mrs. A. Ram-
at in the Dispensary here
Dispensary Fund."

During the year under report the Dispensary has been opened throughout, but no patients were taken into hospital till May 24th, as the accommodation for in-patients was not ready. Miss S. L. Brierly and Miss Nehemiah arrived in Fort Sandeman on March 11th, 1912, and took over charge from Sub-Assistant Surgeon Gopal Dass on March 12th.

The total number of patients during the twelve months from December 1911 to November 30th 1912

1,661 compared with none in 1911. New dispensary patients 1,577, against 3,186. Patients visited at their homes. Among the new dispensary patients country patients numbered 520, against 691. Daily average number 173, against 16.13 in 1911. There were 41 minor operations, mostly performed by Miss Nehemiah. The greater number were gynaecological. There have been a few clerks' men from the police lines, and a few women.

At present one Lady Superintendent, one Lady Sub-assistant Surgeon, one Ward servant (untrained), one general help (untrained), one sweeperess and two chookidars.

A new in-patients ward has been completed within the last few months, and is a great improvement on the old ward. It is commodious and secures complete privacy for the patients; it has already had a fair number of inmates and is likely to be much appreciated.

Miss Brierly and Miss Nehemiah of their stay have shown themselves much to be hoped that the difficulty of their stay permanently in the place has

Mysore Branch.

which has been forwarded by Dr. P. S. statement enclosed herewith it will be upul nurse Chenna Basamma, who was on sick leave last year, rejoined the hospital on the expiry of her leave. At the end of the requisite course she was examined, and having been found unfit for the discharge, her stipend was stopped. She is end of that period the

was on during the year under report. Of these Chinnam-her 11th month of training, Annamma in her 10th month, Anthoniamma stayed away after a month's study, Ammaniamaul is in her 8th month of training and Susai Mariamma completed a 7 months' course. As her progress, however, was not satisfactory, her scholarship was stopped from the 15th November 1912, but she was permitted to continue her studies as an unstipended pupil. Elizabeth Thomas is in her 5th month of training, and Sophia in her 2nd month.

During the year under report, 2 female dispensaries were opened, one at Chicklaballapur, on the 2nd February 1912, and the other at Sagar, on the 13th May 1912. Every endeavour is being made to afford medical aid to the women in all villages in the Mysore territory. The midwifery classes are, as usual, conducted in the Maternity hospital at Bangalore and Her Highness the Maharani's hospital at Mysore."

North-West Frontier Province.

The following report has been received from Lieutenant-Colonel T. W. Irvine, I.M.S., the Chief Medical Officer, North-West Frontier Province:—"The King Edward Memorial Zenana Hospital is situated near the Hashatnagri gate. The building is double storied, and was completed in July last, and opened from 1st of June. Both Out and In-door patients are treated. There is accommodation for 14 in-door patients. The total number of out-patients treated from the 1st June 1912 was 14,435, of whom 8,891 were new and 72 in-door patients. The total number of patients treated in their homes was approximately 35. There were 500 operations, both major and minor, and 27 major operations (obstetric) were performed at the patients' homes. In the establishment there is a qualified Female Sub-Assistant Surgeon, 2 compounders, 2 ward servants, 1 bhishti, 1 sweeper and a gate-keeper. This hospital is a great benefit for women and children, both Mohammadans and Hindus. The total number of out-patients treated in No. III Female Dispensary from the 1st January to 31st May 1912 was 12,226. Of these 5,938 were new, and there were 373 operations."

Dera Ismail Khan.—Report by Miss A. M. Headwards, L.F.P. & S.:—"The hospital was opened by Sir George Roos-Keppel on January 20th, 1912, when Miss Robinson, M.B., Ch.B., was in charge. I took over charge on April 7th, 1912.

The number of patients treated in the hospital, both in and out-door, has increased throughout the year. In-patients numbered 198, and there were 2,710 new out-patients. A few cases were also treated in their homes. Operations during the year numbered 95, including 6 major. There would possibly be more operative work done if the staff was larger, as it is difficult to manage operations without trained assistance. In a few cases the patients do not object to the Male Assistant Surgeon helping, but several operations were not done because the patients objected. The number of labour cases admitted during the year was 13, including 4 abnormal.

The hospital is attended by all classes of Hindus and Mohammadans, purdahnashin or otherwise, including Pathan women during the winter. The latter sometimes come from a long distance for treatment.

In winter the hospital can only accommodate 14 patients, but in summer a larger number can be taken in, as beds are placed on the verandahs surrounding the hospital. There are 8 rooms for the in-patients. Since my arrival one of these has been converted into a labour room as we hope to increase the number of such cases during the coming year.

The hospital is maintained entirely by the Municipality."

Abbottabad.—Report by Captain J. Anderson, I.M.S., Civil Surgeon, Hazara:—"The dispensary is patronised by genuine purdahnashins of all creeds, including the Sardar class, and is attended by all classes of Hindus and Mohammadans—purdahnashin or otherwise. Women from many of the outlying villages come to the hospital for medical aid, both as out-door and in-door patients.

The accommodation for in-patients is 8. The rooms are arranged on the family basis, and husbands can stay in hospital in attendance on their wives.

The total number of out-patients treated was 1,908, and of in-patients 13. The number of patients treated in their homes by the Female Sub-Assistant Surgeon and the hospital Matron was 50.

Forty-nine cases of normal labour were treated at their homes, of these 44 were attended by the Matron.

Sixteen minor operations were performed by the Female Sub-Assistant Surgeon during the year.

The number treated this year was less than last, for the reason that the dispensary was

without a female Sub-Assistant Surgeon for 3 months, due to the transfer of Mrs. K. Davis to Peshawar.

The dispensary is maintained by the Municipal Committee, Abbottabad.

At present there are no residential quarters for the Female Staff in the hospital compound, and there is no suitable room for the female dispensary. But these are included in the scheme for the new hospital building.

Mrs. K. Davis and Miss N. Joshua held charge of the dispensary, the former to 31st May 1912, the latter from 1st June 1912 to 2nd October 1912."

Malakand.—Report by Captain R. W. Jack, I.M.S., Civil Surgeon, Malakand—"The Lady Minto Swat Hospital is maintained by a local fund, assisted by the Dufferin Fund. No addition or alteration in the buildings has been made during the year. Miss I. Keess, L.M.S., has been in charge of the Female section of the hospital throughout the year.

One compounder, one matron and one female sweeper are attached to the hospital. The number of patients treated during the year was in-door 19½ and out-door 2,714. Seven major and 82 minor operations were performed. Three hundred and fifteen cases of diseases peculiar to women were treated. Three cases of normal labour were attended, one being in hospital and two at their homes.

The situation of the hospital is such that the more populous districts are very distant. The work done is, therefore, far less than it would be were the situation more advantageous. The weather has a very marked effect upon the attendance of patients. On wet days practically no cases come."

Kohat.—Report by Miss L. Thomas, Sub-Assistant Surgeon:—"The number of out-patients treated in 1912 was 37,557, of which 15,426 were new and 584 were treated in their houses.

All classes of women attend the dispensary, free of charge, except a few strictly purdah-nashin women who are visited at their own homes when in need of medical aid.

A main ward to accommodate 6 beds, and 3 small wards each of 2 beds, are used for the in-patients.

One hundred and sixty-three in-patients were admitted during the past year. Of 38 normal and abnormal cases of labour, 4 were treated in the hospital. Two hundred and nine major and minor operations were performed, of which nearly all the major operations were done by the Civil Surgeon, in the Civil Hospital, as there is no proper operating room in the Female Hospital. The latter was closed for about a month, and the work carried on by the Assistant Surgeon, Civil Hospital, assisted by the female compounder, as the previous Lady Doctor had resigned. The dispensary is supported from Municipal funds."

NATIVE STATES.

Rajputana.

Reports are furnished on the following institutions by the Chief Medical Officer:—

- I.—The Jaswant Hospital for Women, Jodhpur.
- II.—The Walter Zenana Hospital, Udaipur.
- III.—The Victoria Jubilee Hospital, Kotah.
- IV.—The Lady Dufferin Hospital, Alwar.
- V.—The Female Hospital, Bharatpur.
- VI.—The Mayo Hospital, Jaipur.
- VII.—The Women's Hospital, Bikanir.
- VIII.—The Walter Female Hospital, Tonk.
- IX.—The Female Dispensary, Beawar.

Jodhpur.—The post of Lady Superintendent of the Jaswant Hospital for women at Jodhpur was filled up on the 17th December 1911, by the appointment of Miss B. Griffin, M.B., B.C.H., B.A.O., Dublin. There were 71 in and 3,278 out-door patients treated, against 100 in and 2,960 out-patients in the previous year.

There were 9 major and 83 minor operations performed, against 18 major and 85 minor operations in 1911, and 40 patients were visited at their homes.

Miss H. Paul, the Female Sub-Assistant Surgeon, Bageshir Bai, the Compounder, and Baga Bai, the Nurse, are working as usual.

Udaipur.—A new Lady Doctor, Miss T. Canagasaby, L.R.C.P. & S. (Edinburgh), and L.F.P.S. (Glasgow), a Hindu Lady of Ceylon, was appointed as Lady Superintendent to the Walter Zenana Hospital, and took over charge of the hospital on the 8th December 1911. The total number of patients treated was 114 in-patients and 2,837 out-patients, against 83 and 2,712, respectively, in 1911. Only 47 patients were visited at their homes, as compared with 122 in the previous year. This decrease was due to the fact that there was no female Sub-Assistant Surgeon in the hospital to assist the Lady Doctor. On the 22nd April 1912, Female Sub-Assistant Surgeon Shitabo Bai went on leave, and on expiry of leave resigned her appointment on account of ill-health.

On the 14th November 1912 the hospital was honoured by a visit from Her Excellency Lady Hardinge.

Kotah.—Miss J. Newton, L.R.C.P. & S. (Edinburgh), and L.F.P.S. (Glasgow), has been in charge of the Victoria Jubilee Hospital at Kotah throughout the year. There was a considerable increase in the number of out-patients treated, which shows the popularity of the hospital.

Two hundred and ninety operations were performed in 1912, of which 10 were important operations as follows:—Extraction of lens 1, Turning (Podalic version) 2, Craniotomy 1, application of forceps 3, Curetting for Chronic endometritis 2, and Ovarian tumour 1.

Assistant Lady Doctor Miss Gladys Pownes resigned her appointment in June 1912.

Alwar.—Female Sub-Assistant Surgeon Bala Bai has been in charge of the Dufferin Hospital at Alwar throughout the year. No Lady Superintendent has been appointed since April 1911. Four hundred and seventeen in and 14,276 out-door patients were treated, against 314 in and 13,556 out-door patients in the previous year.

Three hundred and fifty-nine purdah women attended the institution as out-patients, as compared with 411 in 1911, and 26 purdah women were admitted as in-patients, against 18 in the previous year.

There were 65 major and 744 minor operations against 52 and 724, respectively, in 1911. Two nurses were engaged during the year.

Bharatpur.—Female Sub-Assistant Surgeon Bibi Rup Kunwor has been in charge of the Female Hospital at Bharatpur throughout the year. Two hundred and eighty in and 6,420

out-door patients were treated, against 355 in and 8,198 out-door patients in the previous year. Only 25 patients were visited at their homes, as compared with 515 patients in 1911. This decrease in the out-door attendance was due largely to the absence of the Female Sub-Assistant Surgeon on three months' leave during the year under report. There were 94 operations done in 1912.

Jaipur.—Miss L. E. Sykes, M.D., and L.R.C.P. & S. (Edinburgh), has been in charge of the Female wards of the Mayo Hospital, Jaipur, throughout the year. There was a decrease in the number of patients treated at their homes, which was due to the outbreak of plague in the Jaipur City.

The compounding, dressing and nursing in the female wards is done entirely by females.

Bikanir.—Female Sub-Assistant Surgeon Elizabeth Moji Ram has been in charge of the Female wards of the Bhagwan Das Hospital, Bikanir, throughout the year. There was an increase of 1,010 in the hospital attendance, as compared with the previous year.

One hundred and twenty-six major and 551 minor operations were performed, against 122 major and 817 minor operations in 1911. The work done was generally satisfactory.

A new Female Hospital is nearly completed.

Tonk.—Miss K. Reed, L.R.C.P. & S. (Edinburgh), L.F.P. & S. (Glasgow), and L.M. R.C.P. (Ireland), has been in charge of the Walter Female Hospital at Tonk throughout the year. There were 219 in and 7,812 out-door patients treated, as compared with 211 in and 7,547 out-patients in the previous year.

Four hundred and one operations were performed, of which 44 were major, the important operations being—Extraction of lens for cataract 2 and Obstetric operations 6.

There were 375 patients visited at their homes.

The Lady Doctor reports that as purdah rules are strictly observed in the hospital, parda ladies of a high class including His Highness the Nawab's own sisters and daughters attend freely for treatment.

Beawar.—The work in the female ward of the Charitable Dispensary at Beawar has been carried on under Female Sub-Assistant Surgeon Pandita Sunder Lal throughout the year. Forty-one in and 9,581 out-door patients were treated, against 4 in and 1,732 out-patients in 1911, and 148 patients were visited at their homes as compared with 14 in the previous year.

There were 473 operations, of which 28 were major, out of which 21 were important as shown:—Extraction of lens for Cataract 3, Rhinoplastic operations 2, Entropion 15 and Hæmip 1.

Ajmer.—A Female Sub-Assistant Surgeon has not been appointed as yet to the female wards of the Victoria Hospital at Ajmer for want of funds.

Hyderabad (Deccan).

The Director of His Highness the Nizam's Department has very kindly furnished the

Institutions to which Lady
special female medical relief.

Aurangabad.—Assistant Surgeon Miss DeLemos held charge of the female branch of the Aurangabad Civil Dispensary for a period of 7½ months, and was then called into the Victoria Hospital at Hyderabad to take the place of one of the Lady Doctors who was granted sick leave. Sub-Assistant Surgeon Miss S. Kasseem, who was subsequently posted to Aurangabad, held charge for 3½ months. The number of female out-patients treated at this Dispensary was 3,004 new and 4,921 old, making a total of 7,925, and the operations performed were 65, including 5 select operations. 25 cases of natural labour were conducted by the midwife.

During the year a Lady Doctor, three female sub-assistant surgeons, 16 midwives, 3 matrons and 4 female compounders were working in the cause of female medical aid in the several medical institutions of the State.

The four stipendary female medical pupils also continued to study throughout the year, one in the Madras Medical College and the other three in the Rayaparam Medical School.

A site for the Maternity Hospital, proposed to be built at Trichur with the Edward Memorial Fund of Rs. 23,000, has been acquired for Rs. 12,500, and the work of construction will soon be taken in hand.

Central India.

Bhopal—Mrs. F. D. Barnes, M.D., the Superintendent of the Lady Lansdowne Hospital, describes the work accomplished in 1913 as follows:—"There have been one or two changes in the staff. House Surgeon, Mr Hemasfer, has been relieved by Miss Dee, L.M.S., who has done most useful work here. I was fortunate, too, in securing the services of an European Matron. Both the House Surgeon and Matron have given every satisfaction during the year. A trained female compounder was engaged, and I have now two probationer compounders being trained under her. These two girls are pupils of our Minto Nursing School, and have been under our tuition for the past three years.

Six Dufferin *dais* have been under training during the year. The four sent up for their examination were successful, two of whom are now on the Nursing Staff of the hospital. The other two are working in the City.

The returns show an increase of both in and out-patients, as also the number treated in their own homes.

Members of my Nursing Staff have been sent to other States to conduct cases and for General Nursing, and have done well.

I have once again to acknowledge the help I have always received from the Agency Surgeon, Major B. P. Haig, M.S.

Her Highness the Ruler of Bhopal continues to take the keenest interest in the work and herself pays visits to the hospital during the morning when work is busiest.

I and a member of my staff, the Matron, have undertaken the inspection of the sanitary arrangements of the houses in the City, and on Sundays, being the only free day, we visit the various circles in the town, paying house-to-house visits, noting and advising on the sanitary arrangements of the zenana portion of the houses. I submit a report of my visits weekly to Her Highness and to the Municipality. I am doing this until such time as Her Highness is successful in obtaining the services of a female Sanitary Inspector, as the work entailed requires a separate individual for this special branch alone.

During the year under consideration Her Highness has made over the Female Orphanage and its girls to me. We have sixteen children from 18 months to 14 years of age now in the Orphanage. The children are taught English and Urdu, and the senior girls general house-keeping and nursing.

I have also inaugurated a branch of the St. John's Ambulance Association amongst the *dais* and orphans. One a senior and one a junior branch. Pupils receive the general training and have been reported as smart in their stretcher drill. In addition to these two branches I lecture once a week at the Ladies' Club, where another branch has been started.

Gwalior.—The attendance at the Jaya Arogya Hospital for Women, both in and out-patients, has been higher than that of last year. The numbers increase yearly and the popularity of the hospital grows with each year. The increase in the number of maternity cases was most satisfactory. Among the major operations may be mentioned Hydatid of liver (cured), successful Ovariectomies, successful Porro's operations, Caesarian section, Craniotomy, Forceps, Podalic Extraction.

Mrs. Grace Stephens continues in charge, and is assisted by Miss Dara Chiolett, who holds the Assistant Surgeon's Diploma of Bombay and the M.D. of Brussels, and Miss Theobald, an assistant surgeon from the Cakutta Medical College.

The Durbar has sanctioned a female staff for the Ujjain Civil Hospital from the current year, consisting of a lady assistant surgeon, compounders, nurses, etc. As soon as accommodation is found for the housing of this staff, arrangements will be made to open the female hospital. The Association will no doubt welcome this addition to the existing institutions for female medical aid in India.

Indore.—Attached to the Maharaja Takaji Rao Hospital is a separate building, the Maharani Chandravati Female Hospital, under the charge of Miss Motibai Thanavala, L.R.S., with Mrs. Siddons (certificated) as her assistant. This department has 24 beds for women including a maternity ward of 12 beds, with lying-in and operating rooms. The building was opened in 1907. About 300 in-patient gynaecological cases are treated per annum: other diseases of women going into the family wards of the General Hospital. All female out-patients are similarly treated at the general out-patient room. From 60 to 80 confinements are treated in the lying-in ward.

The King Edward Hospital, Indore Residency, has 3 lying-in wards, and women's diseases are treated in the family wards of the institution. In this part of the country purdah is not so strict as in other parts.

Jaora.—Miss R. McVan continues in charge of the Victoria Zenana Hospital.

The increase in number of in and out-patients shows that the popularity of the hospital is growing.

There were 181 minor and 4 major operations during the year under report.

Rewari.—This report draws special attention to the increase in patients, *viz.*, 2,341 more than that of the last year, and the number of minor operations performed is 348 and 12 cases of delivery by forceps were undertaken, or 93 and 2 more than that of the last year.

The general condition of the hospital was the same as last year and endeavour was made to secure the services of a Female Compounder through the Administrative Medical Officer, but as he has not been able to supply one at present, the Agency Surgeon will keep the matter in mind in the coming year.

Miscellaneous.

Baroda.—At the Victoria Wards the in-door patients treated numbered 243, against 286 the previous year. At the Jumabai Dispensary the out-door patients numbered 14,255, against 14,042 in the previous year.

The operations were 1,241. These included 12 obstetric cases at the Dufferin hospital, though the obstetric cases attended by the two city nurses number about 300, and these nurses ask the Lady Doctor for help where necessary. An obstetric hospital is greatly needed here, and a ward is in building for the purpose.

Kapurthala.—The following particulars from Dr. G. M. Friend-Pereira, M.D., have been forwarded by the Chief Minister to His Highness the Maharaja:—"The number of in and out-door patients at the Victoria Jubilee Hospital rose from in-door 272 last year to 291, and from 27,790 out-door to 30,167 during the year under report. Of the in-door patients, 29 were men who had been admitted for cataract operations. There was an increase in the number of operations during the year.

A few maternity cases were treated in the hospital. Three of these required operations. Twenty confinement cases were attended to in town by the hospital staff. A maternity ward and a few detached cottages are badly wanted.

The out-door attendance is very good and includes a number of purdah ladies and some men.

The staff was the same as last year. They have all worked well, especially the sub-assistant surgeon, Bibi Hira Devi, who has done 66 cataract operations, 36 of which were done on men. No alterations have been made in the building or budget."

Srinagar.—S. A. Fraser, Esq., C.I.B., Resident in Kashmir, forwards the following reports from the Superintending Surgeon, Kashmir State Hospitals, and from Miss Lauder, M.D., Superintendent of the Zenana Hospital, Srinagar:—

"Extract from a letter from the Superintending Surgeon.—As regards the report of work done at the Diamond Jubilee Zenana Hospital, which is a very fair record and is noteworthy by the fact that more than half of the total number of in-patients were urduah women as well as by the evidence given of the prevalence of Ootex-malaria, for which the 9 Porro's Operations were done, I would remark that the need of a separate in-patient department has been omitted, steps to secure the erection of which during the ensuing year are being taken.

Several important alterations in the hospital have been undertaken during the year, notably the building of staff quarters, thereby providing more space for in-patients, and the widening and rebuilding of the main staircase in the hospital, which was badly wanted. The Lady Superintendent, Miss H. Lauder, M.D., who resides on the premises, has with her staff accomplished a great deal of very useful work during the year, and is deserving of every encouragement from the State."

"Report by Miss H. Lauder, M.D.:—The number of patients treated during the year was 583 in-patients and 9,298 in the out-patient department, and 414 patients were visited in their own homes by the hospital staff during the year, making altogether 10,295 patients treated, against 10,201 in 1911. Two hundred and twenty-two purdah ladies were treated as in-patients and 2,526 in the out-patient department. Sixty-eight cases were treated in their own homes by the hospital staff and 33 in the hospital. There were 906 operations during the year and the following are a few selected cases:—Fatty tumours removed (2),

Rajket.—The number of out-patients treated in the Rasulkhanji Hospital during the year under report was 1,909, as against 1,844 of the last year.

The number of in-patients treated during the year under report was 227, as against 170 of the last year.

Miss C. M. Wickham, Zenana Medical Officer, went on six months' leave, and Miss K. McNeill was appointed to act for her.

No other changes have been made in the working of the hospital.

Patiala.—Miss M. J. Balfour, M.D., writes:—"I returned from furlough at the end of November 1911, and took over charge from Miss Jardine, who had carried on the work very successfully during my 8 months' absence.

In the year now ended 521 in-patients and 6,797 out-patients have been treated in the Lady Dufferin Hospital and 6,687 out-patients in the Hendley Female Dispensary. The work has gone on steadily, although during the hot weather I myself was frequently obliged to be absent for short periods attending the family of His Highness the Maharaja in the hills. During these times the whole burden of the work fell on Miss Fernandez, the House Surgeon, who deserves high praise for the steadiness with which she carried on my work as well as her own, and for the good results attained.

Mrs. Yusuf Ali, second compounder, resigned her post during the year and the place still unfilled. Otherwise the staff remains the same as before. The classes in the Lady Carson School have been continued, 7 days having gone up for the 2nd grade exam in July, and 6 having passed.

A distinct advance has been made during the year in the problem of how to improve the condition of women during childbirth in the city. First, a *dai* whose neglect had led to the death of an infant and very nearly to the death of its mother was, on the recommendation of the medical adviser, banished from the city. This has already produced an effect. The city *daïs* have been more careful and anxious about their cases.

Secondly, an order has been passed that after the lapse of 12 months no *dai* shall be allowed to practise in the city who has not the certificate of the Lady Curzon School. This will in time cause a real revolution in the city *daïs*. They will now be obliged to ask for training, instead of coming as a favour. It will be easy to insist on their regular attendance and attentive work, and after their examination the fear of suspension or removal on their certificates will oblige them to work carefully and observe the rules which are imposed on them. Miss Masit has carried on good work in the Hendley Female Dispensary where there has been a satisfactory increase of patients."

Bahawalpur.—Miss Z. E. DaCosta, L.R.C.P. & S., writes in regard to the Jubilee Female Hospital :—"The new hospital was occupied last May, and is much appreciated by the patients. It is a great improvement on the old building, and well equipped. The great difficulty is the staff. This year the staff has been very small. The 2 compounders have worked very well. There are 2 *daïs* and 1 pupil *dai*. I trust this matter will be remedied next year, and that the Members of Council will be good enough to sanction the staff for which I have asked."

The report further states that the in-door patients numbered 300 new, and 401 were treated at homes. The out-door patients numbered 9,543 new, or new and old 26,486. There were 13 maternity cases treated in the hospital and the same number at their homes.

Nahan.—The work of the Zenana Hospital is stated to be most satisfactory, compared with past years. This is said to be due mainly to the efforts of the Lady Doctor, Miss A. Singha, who has shown herself indefatigable in her duties connected with the hospital.

His Highness has taken particular interest in the working of the hospital, and has lately had the operating room floor and walls marbled, which seems to be much appreciated by the patients.

Jhind.—This report merely states that there is nothing special to record, except that the hospital is steadily gaining in popularity.

Darbhangha.—There were 42,006 out-door patients this year, against 42,769 the last year.

The total number of in-door patients and patients treated at home amounted to 590 and 129, against 459 and 130 in the previous year.

No other particular work was carried out during the year under review, requiring special note.

The Victoria Memorial Scholarships Fund.

EXECUTIVE COMMITTEE.

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H^{ER} EXCELLENCY THE LADY HARDINGE OF PENSHURST, C.I.

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Bengal—Inspector-General of Civil Hospitals

Central India—Agency Surgeon, Indore

Central Provinces—Honorary Secretary, Dufferin Fund, Nagpur.

Punjab—Inspector-General of Civil Hospitals

Rajputana—Residency Surgeon and C. M. O.

United Provinces—Inspector-General of Civil Hospitals.

The Victoria Memorial Scholarships Fund.

Rules and Regulations.

1. The sums raised in furtherance of the above object shall constitute the Victoria Memorial Scholarship Fund, shall be kept separate from the present investment of the Countess of Dufferin's Fund proper, and interest accruing therefrom shall be exclusively used for the object for which Lady Curzon instituted the said Fund.

2. An Executive Committee shall be appointed by the Central Committee and charged with its direct management, and this Committee shall consist of—

- (1) the Lady President;
- (2) the Director-General, Indian Medical Service;
- (3) a member nominated by the Central Committee;
- (4) the Honorary Secretary, Central Committee, Countess of Dufferin's Fund.

3. For the local administration of the Fund there shall be formed a Local Committee in each centre of operations, consisting of—

- (a) the Civil Surgeon of the district,
- (b) the wife of a senior Civilian, and
- (c) a Secretary selected by the other two members.

The Local Committee shall in each instance be in direct communication with, and immediately responsible to, the local Inspector-General of Civil Hospitals or Administrative Medical Officer, who shall be guided by such instructions as the Executive Committee may think fit to issue.

4. The Executive Committee shall issue the necessary formal instructions to the Provincial and Local Branches, it being distinctly understood—

- (a) that the interest of the subscriptions shall be, as far as possible, expended in the districts whence they have been received, and
- (b) that in all cases the *dais* shall be instructed in hospitals, training schools and dispensaries lying nearest to the localities in which they will ultimately be engaged.

5. The said Fund may be utilized not only for the provision of scholarships, but also for the payment of teachers, provision of models, books and such incidental expenses as the Executive Committee may consider to fall within the objects of the Fund.

6. The Executive Committee may call for special reports from the Local Branches regarding their administration of the said Fund, and the results shall be shown in a separate section of the ordinary annual report issued by the National Association for Supplying Female Medical Aid to the Women of India.

The Victoria Memorial Scholarships Fund.

THE main objects of the Victoria Memorial Scholarships Fund, initiated by the late Lady Curzon in 1901-02 with the object of keeping in perpetual remembrance the sympathetic interest taken by the late Queen-Empress in the domestic troubles of the women of India, have already been duly explained in previous reports; and before giving a summary of the work accomplished in 1912, and in order that there may be as little misconception as possible about the scheme, the Committee thinks it advisable to again repeat what has already appeared in previous reports regarding the definite nature of the Fund -

The general object of improving the treatment of childbirth in India can be approached on two lines, which admit of being followed concurrently and which react on each other:—

- (1) to train up midwives of a superior class;
- (2) to endeavour to impart a certain amount of practical knowledge to the indigenous midwives (*dais*).

The former course, which is that followed in the main by the Dufferin Fund, presupposes a certain standard of education among the women who are trained. They must be able to read and write, and be capable of understanding lectures and studying simple text-books. It is, therefore, out of the question, until the number of educated women in India has very greatly increased, that the number of highly trained midwives should be anything but infinitesimally small in relation to the demand for their services. Such midwives, moreover, receive relatively large salaries and charge high fees; most of them belong to classes more or less out of touch with the customs and traditions of the people, and their sphere of action is limited by these considerations. Lady Curzon therefore decided that the proceeds of her appeal should be devoted to carrying out as far as possible the second of the two courses mentioned above. This she believed to be an entirely new departure. It proceeds on the principle of making the best of actual facts and existing agencies, thus endeavouring gradually to improve them. The general idea is to get hold of as many as possible of the indigenous hereditary midwives and induce them to attend at Dufferin Hospitals, or at the female divisions of ordinary hospitals or dispensaries, for the purpose of acquiring such empirical knowledge as it is possible to impart to them. In comparison with the training of the regular midwife class, the amount of such knowledge will be very small; but the women themselves, or some of them, would start with a certain practical acquaintance with the subject and will p...

quickly. Even if at first only negative results are obtained, and the trained women merely abandon or discourage insanitary practices, the gain will be great. In time they will learn more, and whatever they learn will spread over a far wider area than can be reached by means of the superior class of midwives. The teaching will at first be oral, and will be conveyed in the colloquial language familiar to the pupils. And in order that this should be carried into effect, short and simple primers of midwifery practice in the various vernaculars have been prepared for the use of *dais*. In many of the classes reading and writing are being taught to enable the pupils to refer to these books. Much of the teaching will be committed to memory, and will tend to popularise the improved methods which will be taught to the *dais*.

In order to give effect to these principles, the objects of the Fund have now been defined to be—

- (1) To train midwives in the female wards of hospital and female training schools in such a manner as will enable them to carry on their hereditary calling in harmony with the religious feelings of the people, and gradually to improve their traditional methods in the light of modern sanitation and medical knowledge.
- (2) Scholarships to midwives will vary according to circumstances and locality.
- (3) When desirable qualified female teachers, who understand the vernacular, will be sent to outlying districts, and fees will be paid to midwives who attend a course of elementary instruction.
- (4) Funds for the above purpose will be granted, as far as possible, according to the interest received on the sums raised in each locality.

As long ago as the fourth century, *A. D.*, India possessed in the *Susruta Samhita*, a treatise on midwifery which a well-known specialist describes as a "thoroughly rational system of medico-surgical teaching based upon accurate observation of nature." The same writer refers to the barbarous character of the modern treatment of childbirth in India, and observes:—"The degradation of the art of midwifery among the Indians to so low a stage must be ascribed in part to the caste prejudices of the people." The proposals sketched above are, in effect, a revival of the most ancient tradition and practice in India, and as such have received enthusiastic support from all patriotic Indians. Although the Fund was only started eleven years ago the Committee is glad to report that its aims and objects are evidently warmly appreciated throughout the country by Indians of all classes.

As has been stated in reports for previous years, considering the very short time that efforts have been made for the better training of the indigenous *dais*, the Committee has no reason to be discouraged at the limited success which has attended its efforts in certain parts of the country. The

difficulties with which it has to contend continue practically unchanged from year to year, and extraordinary superstitions, caste prejudices and ignorance have all to be overcome in carrying out the objects of the scheme.

The reports for the past nine or ten years have indeed all borne testimony to the extraordinary difficulties which exist with regard to the training of the hereditary *dais*, as well as that of the ordinary midwife.

The extracts from the district reports which are set forth below are published in the hope that the suggestions and difficulties which are alluded to therein may prove of value and assistance to some of those who are engaged in furthering the objects of the Fund.

It has to be remembered that only a very small percentage of Indian women are to-day able to read or write, and all the reports state that the general ignorance of the women who attend the classes in various parts of the country is the main stumbling-block which has to be overcome.

In some parts of India ladies of the highest family still prefer the methods of the hereditary *dai* to those of the qualified Lady Doctor, and the fear of losing their practice still prevents many of the ignorant *dais* from accepting scholarships, and from attending classes where they have opportunities of learning modern ideas. Some *dais* indeed consider themselves as more than proficient and regard any offer of teaching in the nature of an insult, while others oppose all European principles, and obstruct the Lady Doctors who would improve their knowledge in every possible way. Moreover, there is no doubt that cases do occur in which *dais* after having been paid to attend regular courses of instruction have subsequently reverted to their old practices, as they have found that their patients have disapproved of improved methods. One recent report stated that the trained *dais* were unpopular because they washed their hands in soap and water instead of mud and water!

• The actual period during which women should be retained in classes for study varies largely throughout the country. The Executive Committee for various reasons has not deemed it wise to prescribe any uniform period of instruction, and provincial and local centres use their own discretion in issuing rules on this subject. While some classes are held for three months, others continue for three years.

The value of scholarships offered to women as inducements to attend classes also varies in a somewhat remarkable manner, and this question is also left to the discretion of local Committees.

In certain cases, moreover, where it is found impossible to attract the indigenous *dai* the Executive Committee have consented to funds being expended on the training of a better class of women in the hope that her more ignorant sister may be tempted by the educated women's success to avail herself later on of the benefits which are held out to her. But wherever the indigenous *dai* can be induced to undergo a course of training the funds are invariably spent for her benefit.

The special elementary "Manual of Midwifery" for the use of midwives in receipt of scholarships from the Victoria Memorial Scholarships Fund, which was compiled at Lady Curzon's desire by Lt.-Col. C. P. Lukis, M.B., I.M.S. (now Director-General of the Indian Medical Service), continues to be found of considerable service. The book which contains an introduction by Surgeon-General Sir B. Franklin, K.C.I.E., is published by Messrs. Thacker, Spink & Co. Many hundreds of copies have been distributed to a large number of centres and schools of instruction, and arrangements have been made for its translation into the vernacular of the various districts engaged in the teaching of midwives. It has already been translated and published in Urdu, Hindi, Gujarati, Marathi and Bengali, while its translation into Tamil, Telugu, Malayalam and Burmese has been arranged by the provincial centres concerned. An illustrated edition in Kanarese at the expense of the Mysore Government, and another in Roman Urdu by the Patiala State, have recently been issued. Applications for copies of this manual in English, Urdu, Marathi, or Gujarati should be made to the Secretary, Viceroy's Camp.

The financial statement appended to this report shows the income and expenditure of the Fund for the year under review. The year opened with a credit balance of R603-11-2, and closed with a credit balance of R422-12-8.

The interest on investments during the year amounted to R30,258.

The expenditure on grants-in-aid towards the objects of the Fund was R28,199, and the working expenses R2,395.

The reports of the local centres, while pointing the very slow progress in several directions, contain as usual a number of encouraging remarks regarding the general advance of the work. In Bihar and Orissa, to which Province many of the classes in the old Province of Bengal have been transferred, several new classes have been opened, and the work of the Cuttack centre where the system is excellent is specially well reported on, as the demand for trained *dais* is steadily increasing in that district.

At Ludhiana in the Punjab systematic training has continued throughout the year, and the results are encouraging, as no less than 20 indigenous *dais* attended the classes.

In the United Provinces good progress has been made on the whole.

At Allahabad the Municipality has taken up the subject of infant mortality, and has employed eight passed *dais* from the hospital to supervise the work of the indigenous *dais*. At Agra all the *dais* working in the city are indigenous women and 754 cases were attended against 325 in the previous year. The progress of the class is described as very satisfactory.

In Bhopal, where Her Highness the Begum takes a keen personal interest in the work, a class of 31 indigenous *dais* from the city is maintained, and during the year ten village *dais* were secured through the district Tehsildars.

No less than 1,770 cases were attended by *dais* in the city; in addition to difficult hospital cases.

At Gwalior the work is making very steady progress, there is a growing demand for trained *dais*, and highly encouraging reports are received from the patients they attend.

In Hyderabad the report says public confidence in the work is steadily growing, and all the passed *dais* with good characters are doing well in the districts.

The Agent to the Governor General in Rajputana notices with satisfaction that the effects of the Fund's training are becoming apparent pretty well all over Rajputana.

In Mysore efforts are being made to afford relief in every village in Mysore territory.

The following brief extracts from the reports which have been received from the various Districts and Native States where branches of the Victoria Memorial Scholarships Fund have been established indicate some of the difficulties with which the local Committees are faced, as well as the progress which has been made during the last twelve months.

The Officiating Residency Surgeon and Chief Medical Officer in Baluchistan forwards the following reports regarding Quetta and Sibi :—

Quetta.—Miss E. M. Cardozo states that :—"In September two *dais* were examined by Dr. Gertrude Stuart of the Zenana Mission Hospital, and both passed. She suggested that the number of normal midwifery cases conducted by each of the *dais* during their period of training should be at least ten. This number is not possible during the course of two years as the number of normal cases that come under my control are very few, and so I proposed to the Honorary Secretary, Baluchistan Branch, that the period of training be raised to 3 years. There are three *dais* training at present and they are working satisfactorily."

Sibi.—Miss A. Alfred, L.M.S., reports as follows :—"Since the opening of the class six *dais* have been trained, and three are under training. Of the six, one went up for the examination and failed, and did not reappear. Another had to leave owing to some personal trouble, and the remaining four passed out, and one is working in the male Civil Hospital, Quetta.

Dai Hyaten, an indigenous *dai*, who was sent by Margagain Sirdar for training, has gone back to work in the villages. She is very popular among the people, who willingly engage her.

Dai Halima, who also belongs to the indigenous class, was sent for training by Baruzai Sirdar. After returning to her village, Kurk, she is employed by all the people there. She is also well known in the city here, and is often sent for to attend cases from her village. When in difficulty, she often brings the cases to hospital for consultation and treatment to the village. The Political Agent pays her Rs 6 per mensem for a year and

Dai Sumri does not belong to the hereditary class, but she passed out creditably, and was given a post at Loralai, in the female ward of the male Civil Hospital. She is allowed to take up private midwifery cases. All the people quickly began to engage her, and the old ignorant *dai* of the place found herself out of work.

I am told that the Civil Surgeon was quite surprised to find that women of this country could be taught to so usefully help in sick nursing, surgical dressing and to conduct natural labour cases.

Three pupils, not of the *dai* class, joined in November 1911. One died, and her place was occupied by a local woman, who however seems incompetent. Two others can read and write and are learning the work satisfactorily.

Colonel G. F. A. Harris, c.s.i., Inspector-General of Civil Hospitals, Bengal, furnishes the following notes :—

“Owing to the recent constitutional changes, the *dai* classes at Bankipur, Gaya, Arrah, Champaran, Saran, Muzaffarpur, Darbhanga, Monghyr, Bhagalpur, Purnea, Cuttack, Balasore, Puri, Hazaribagh, Ranchi, Daltonganj, Purulia and Chaibassa, have gone over to the newly created province of Bihar and Orissa from 1st April 1912, while only one *dai* class, *viz.*, that at Dacca, has come over to this province from Eastern Bengal. The following statement furnishes details of the work done and the financial position of the classes which are now under the Bengal Centre.

Dai classes were in operation during the year only at Bankura, Hughly, Darjeeling and Dacca (the *dai* class at the Dufferin Hospital, Calcutta, being left out of account as there are no separate Victoria Memorial Scholarship Fund *dais* there). The class at Hughly, which was temporarily closed in 1911, was reopened in October last through the efforts of Major Waters, the present Civil Surgeon. The three *dai* classes in the district of Murshidabad could not be reopened for want of pupils. The working of the *dai* class at Dacca has been most satisfactory, considering that 6 pupils have passed out of it during the year under report, and that 8 are still under training. It is reported by the Superintendent of the Dacca Medical School that the class there is not maintained by the Victoria Memorial Scholarship Fund, which did not exist in the late Province of Eastern Bengal and Assam, but that its expenditure is borne by the Municipality and District Board of Dacca, from which a contribution of Rs 360 was received during the year under report. If necessary, money will now be allotted from the Victoria Memorial Scholarships Fund at my disposal towards the cost of maintenance of that class.

The total number of passes during the year under report was 9 (excluding *dais* trained at the Calcutta Dufferin Hospital). Six passed *dais* were presented with certificates prescribed by the Executive Committee, and 4 were awarded presents consisting of instruments and appliances.

The annual grant of the Bengal Centre has now been reduced from Rs. 1,892 to Rs. 1,242 with effect from 1st December 1912, in order to provide funds for the training of *dais* in the New Province of Bihar and Orissa. Out of the contribution of Rs. 1,892 received during the year under report, a sum of Rs. 256-7-0 was made over to the Inspector-General of Civil Hospitals, Bihar and Orissa, for furthering the cause of *dai* training in that Province; besides a sum of Rs. 393-9-0 allotted to the *Dai* Classes in the Bihar and Orissa Districts prior to their separation from Bengal, and Rs. 96-10-8 was spent in paying stipends, etc., to the *dai* pupils in Bengal."

The first annual report submitted by Lt-Colonel F. J. Drury, I.M.S., Inspector-General of Civil Hospitals, Bihar and Orissa, gives hope of increased activity in this centre in the future. He states that.—"The new centre of the Victoria Memorial Scholarships Fund for the Province of Bihar and Orissa was formed with effect from May 1912, and the Inspector-General of Civil Hospitals accepted the office of the Honorary Secretary to the Provincial Branch of the Fund. The Executive Committee of the Fund placed at his disposal Rs. 600 towards the cause of *dai* training in this Province for the remaining six months of the past year. They have also promised to give in future an annual grant of Rs. 1,152 for this purpose."

There were five *dai* classes in operation for the training of indigenous midwives, viz., one each at Bankipur, Gaya, Arrah, Huttwa and Cuttack, against six in the previous year, because the class at Ranchi could not be opened for want of pupils. The Civil Surgeon of Ranchi has, however, asked the European mission authorities in that town to help him in obtaining pupils for the *dai* class, and it is possible that a class may soon be opened there. A new class has lately been started at Puruha, with four pupils. New classes will also be opened soon at Chapra and Bettiah. Adequate help has been given towards these objects from the funds placed at my disposal.

The Civil Surgeons of other districts have also been requested to try their best to open new classes where there are none at present, and also to reopen the classes which have been closed for want of pupils. The failure of these classes is partly due to ignorance and the caste prejudices of the class of women from which *dai* pupils are recruited, and partly to the fact that amongst the uneducated masses the services of the passed *dais* are not much sought after. They still prefer to call in the untrained indigenous midwives.

The most successful class in this centre is that at Cuttack, and the method under which it is worked is very satisfactory. The *dais* under training are residents in the Cuttack General Hospital. They are made to work in the wards and attend all labour cases treated in the hospital. Besides the teaching in midwifery and demonstrations with instruments and diagrams, they are given instruction in the details of nursing and preparation of food for invalids. It is encouraging to know that the demand for the services of passed *dais* is gradually increasing here, and their work is being appreciated in the

Zenanas of the educated people of the town. The Civil Surgeon reports that this satisfactory state of things is mostly due to the efforts of the Lady Doctor, Miss Pravabati Sinha, attached to the Cuttack General Hospital, and he recommends that a reward should be given to her.

The class at Hutwa also deserves special notice. It has been working regularly since May 1902, when it was first opened. The special feature of this class is that it has a substantial invested capital in Government/Promissory notes for its maintenance, which clearly indicates the interest the local people take in it. In fact, the interest of the local influential gentlemen in *dai* classes is most valuable, and it should be the aim of our officers to promote it.

The total number of *dais* passed in the Province during the period covered by this report was 11, against 10 in same area in the previous year. The total number of passed *dais* in the area now covered by the Province of Bihar and Orissa is 192 up to date.

The total receipts of the *dai* classes for the year under report amounted to Rs. 106-5-0, of which Rs. 671-9-0 was given from the Victoria Memorial Scholarships Fund. Up to date Rs. 587 has been distributed, leaving a balance of only Rs. 13."

Burma.

The report from this centre gives little information. It states that 48 midwives have been trained to date; that 11 passed in 1912 and that 5 Burmans, 4 Karens and 1 Arrakanese were under training at the close of the year.

Berar.

The following report has been received from the Honorary Secretary of the Berar Centre:—"Only 2 pupils were trained as *dais*. There was no pupil under training at the close of the year. Since the hereditary *dais*, or their daughters, or female relations have not offered themselves for training, the Executive Committee have, at the request of this Branch Committee, kindly sanctioned, as a temporary measure, the training of midwives of a better status on condition that preference should be given to hereditary *dais*, when forthcoming.

Rules for the new class have been framed, and their substance is being advertised in the local papers for securing suitable pupils for the class in the Amraoti Female Hospital.

The Lady Doctor reports that some of the candidates who came forward for training in the class for superior midwives have refused to join the class, either on the ground that they object to share a room with another pupil, or to sign the agreement which binds them to give their services to the Berar Branch of the Dufferin Fund for a period of one year at Rs. 15 a month, and to refund the expenditure incurred in training if they leave the midwifery class, or the service of the Fund without permission, or are discharged for misconduct. The Committee were not aware until the end of the year that these objections had been raised; the first objection can be removed, at least, so

long as the number of pupils remains small, but the other seems unreasonable, and the Committee hope that as the Lady Doctor becomes better known in Amraoti this requirement of the agreement may not hinder recruitment."

Mr. R. W. Johnson, the Honorary Secretary of this centre, summarises the progress thus.—"As in the preceding year the operations under the Victoria Memorial Scholarships Fund in the Central Provinces were confined to only one centre, *viz.*, Jubbulpore.

A class for the training of indigenous *dais* continued to be held at Jubbulpore during the year under report, and the Lady Doctor in charge of the class reports that out of the three pupils in training two passed their examination in December 1911, while the third passed out in September 1912.

The present class consists of two new pupils. During the year the Executive Committee permitted the diversion of the funds at the disposal of the Central Provinces Branch to the training, when unavoidable, of midwives other than of the hereditary class and Rs. 1,320 were devoted, during the year 1911-12, to meet the expenses of the midwifery class conducted by the Nagpur Branch, and another Rs. 1,200 have been allotted for the same purpose during the year 1912-13.

At present there is no apparent opening for extension of the work under the Victoria Memorial Scholarships Fund, but enquiries are being made to ascertain whether any further development is practicable by the Jubbulpore Branch."

In Madras the training of midwives was commenced in 1887 and since then 152 have passed out. Of these 102 were employed by local bodies after completing their training. No reliable information concerning the remainder is available, but no doubt some of them are doing useful work in remote villages of the Presidency.

No difficulty has been experienced in obtaining pupils for these classes, and in addition to those stipended by the Fund, a number of pupils are undergoing training at many of the hospitals in the mofussil. Those stipended by the Fund receive Rs. 8 per mensem. During the year ten pupils have passed out successfully, and of these, four have found employment under local boards, the others engaging in private practice at various centres.

The report of Colonel C. J. Bamber, I.M.S., the Inspector-General of Civil Hospitals, Punjab, is also interesting:—"During the year 1912, classes for the training of *dais*, under the auspices of the Victoria Memorial Scholarships Fund, were carried on at Ambala, Ferozepore, Simla and Ludhiana.

Rawalpindi.—No class was held at Rawalpindi, owing to several changes amongst the Lady Assistant Surgeons in charge of the female dispensary, and consequently the outfits purchased were not utilized. These are, however, now being supplied to 3 selected *dais* in the city to be used under the supervision of Mrs. Rodgers, Assistant Surgeon of the Female Dispensary, Rawalpindi, and the results are awaited.

Ambala.—Systematic training has gone on throughout the year at Ambala. In March last two *dais* were examined, one failed, and is still continuing her lessons and expects to appear at the next examination. She, however, does not receive anything from the Fund.

Ferozepore.—Good work is being done at Ferozepore, and during the year under report four women appeared at the Lahore examination, two obtaining certificates. Seven *dais* took up the nine months' course, six of whom secured passes. One of these came from Faridkot and is now helping in the hospital for women there. One woman who passed two years ago is still working in the Moga Hospital, and another who passed last year is in the Hindu Hospital for women at Ferozepore. There are at present two classes, one in English with 3 pupils, and the other in the vernacular with 6, but out of these 9 women, only one is an indigenous *dai*. Dr. Allan experiences great difficulty in getting this latter class of women to come in for training.

Simla.—Although the report is somewhat depressing, it is not altogether without hope of future results. Out of six women originally entertained, only four presented themselves for examination, and though the questions were of an elementary character, only two were able to pass the prescribed test. It was suggested that the course might be extended for another year, but as the women were too old and too ignorant the Civil Surgeon did not consider this course advisable, and an entirely new class had to be arranged. The women attended altogether 14 maternity cases in hospital, and 10 outside, some of these being very abnormal labours treated in the Dufferin ward. The teaching equipment was considered to be inadequate, and the necessary apparatus has been ordered from England. The necessity for quarters for women under training has again been noticed this year, but this defect cannot be remedied until the hospital is enlarged.

Ludhiana.—Systematic training was continued at Ludhiana throughout the year. Eight of the Victoria Memorial Scholarships Fund *dais* appeared at the Lahore examination in March, and seven were successful, three passing with Honours. Out of the six indigenous *dais* who also presented themselves for examination, four passed. The results are on the whole encouraging. Twenty-three women are still under training, and one who failed last March is repeating the course without a scholarship from the Fund.

Twenty-two indigenous *dais* are also under training and attend classes three times a week. The difficulty in persuading these women to show their cases in the city is still very great, and Dr. Brown thinks that if some authority could be exerted to insist on this being done it would be of great assistance. It is a difficult matter, however, as the people object to supervision.

Amritsar.—At Amritsar no classes were held since July 1912, nor has there been any regular class at Lahore during the year under report."

Good progress has on the whole been made in this centre. The Hon'ble United Colonies, Inspector-General of Civil Hospitals, Provinces.

Colonel C. C. Manifold, M.B., I.M.S., submits the following statements :—
Allahabad.—Report by Miss S. H. Commissariat, F.R.C.S.I., Dufferin Hospital.—“This hospital continues to train two *dais*. In the beginning of the year, the class consisted of Saidul and Harban Kunwari. The latter has been dismissed for insubordination and replaced by Nihar, who being intelligent promises to be a suitable *dai*. Saidul continues her course of training and is likely to pass out successfully in another seven months. The Allahabad Municipality has at last taken up the question of infant mortality, and as a preliminary step has employed eight passed *dais* from this hospital to help and supervise the work of indigenous *dais*, to teach them cleanliness, etc., and to work free of charge whenever required to do so amongst the poor.

Nothing so far has been done in the shape of registering the *dais*, nor in compelling them to obtain a certificate of having witnessed cases in hospital. So far, eight indigenous *dais* have attended the hospital for short periods. I am making efforts to induce others to come and learn the first lessons of asepsis, cleanliness and the management of labour. I do not know if Municipal resolutions will achieve the object they aim at until help is given by the intelligent public who should understand the risk they run by employing untrained *dais*. A combined effort should be made to engage only trained *dais* for confinement cases in private houses.”

Lucknow.—Report by Mrs G. E. O'Brien, M.B., B.S. :—“At the beginning of the year there were three Victoria Memorial Scholarship *dais* under training. They have completed their training and have passed their examination successfully. Their places have been taken by two other women. Efforts have again been made this year to attract the indigenous *dai* for training, but these have been unsuccessful, as the indigenous *dai* has usually a practice in the city which is more lucrative than the appointment in hospital. The *dais* at present under training are all Mohamedan women, they are fairly intelligent and work very satisfactorily.”

Ganapore.—Report by Miss F. Leach, M.D., Dufferin Hospital :—“The Victoria Memorial *dais* class which consists of two women has been kept up through the year. Both the *dais* have made satisfactory progress during their term of 14 months' training. They are able to conduct simple normal cases under supervision, but are a little diffident to be alone with a case, and another year's work in company with the *dais* already trained who are sent out into the city to conduct cases will give them more experience and confidence.”

Agra.—This centre is to be congratulated in its success in attracting more of the indigenous class to the local classes. The report by Major E. J. O'Meara, Civil Surgeon and Principal of the Medical School, is as follows :—“The following *dais* were under training at the close of the

previous year :—Janki, Champa A., Nundho, Munnie, Champa N., Bhagwati, Sunderrhia, Jaidevi, Anandie, Latchia.

In February 1912 Janki and Champa N. having attended the requisite number of cases were taken up for their examination, and passed satisfactorily. Janki was granted her certificate, but Champa N. died before she could get hers.

In June, after completion of one year's study, Champa A., Munnie and Bhagwati were examined. They did only moderately well but require another year's training. It was impossible to teach Nundho and Latchia anything, and they were dismissed. Jaidevi was also dismissed in January 1912 on account of ill-health, and Anandie *dai* absented herself without permission and left the class. Sunderrhia *dai* is still under training.

Seven *dais* were admitted into the class during the year, and ten *dais* have been in the class throughout the year.

All the *dais* under training are indigenous women working in the city, 24 lessons on an average are given to them every month, and each *dai* attends about 50 per cent. of the lessons given.

During the year, 754 cases were attended in the city by the *dais* under training, against 325 for the previous year.

On an average I find that three abnormal cases are sent to the Dufferin Hospital every month by the Superintendent.

The progress of the class as a whole is very satisfactory, and the number of cases treated has more than doubled.

The expenditure incurred during the year was R2,165-1-6, and the Fund has a balance of R1,364-0-6."

Benares.—Report by Miss J. George, L.R.C.P. & S.:—"There have been five pupils under training during the year, one passed out 'trained,' the services of another had to be dispensed with owing to inaptitude, and three are still under training.

The number of maternity cases has not been as many this year, and this I attribute partly to the fact that two of our trained women have set up in practice in the city, and are intelligently conducting cases; and secondly, to the antagonistic feeling set up against the hospital by some of the indigenous *dais* of the city, who have the largest practice, and who are opposed to the training classes recently instituted. Patients have reported to me that these midwives refuse to let them come to the hospital by scaring them with stories which are untrue.

The conservative Indian mind does not at first take kindly to any forward movement, and I was prepared for some form of resentment in the shape of a boycott, but as a large number of *dais* and others are attending the hospital, and as tact and sympathy are being exercised, and these women are encouraged to seek help and recognize difficulties early, it is probable that in the course

of time our hospitals will have more maternity admissions than they can cope with.

The Agency Surgeon, Lieutenant-Colonel P. B. Haig, I.M.S., forwards Bhopal. the following report from Miss F. D. Barnes, M.D., the Lady Doctor in charge of the Lady Lansdowne Female Hospital:—"The third class of indigenous *dais* was started in March 1912 with 81 pupils recruited from the city of Bhopal. In response to my suggestion Her Highness issued an order to the tahsildars in the district, and 10 of the village *dais* were also sent for tuition.

These ten women in recognition of the fact that they have left their homes receive five rupees per mensem.

This class is still under tuition, and the ten village *dais*, in addition to attending lectures, have been placed by me on ordinary hospital duties so that their education may be a fuller one. They take their duties in every department of the hospital, attending not only to labour cases, but in the general medical and surgical wards.

This class of 11 *dai*, together with the 61 who have already received their diplomas, conducted 1,770 labour cases in the city, and several cases of difficult labour were brought by them into hospital. I have had to exercise a great deal of firmness in dealing with these women. Whenever an instance has been brought to my notice where the *dai* has misconducted a case I have stopped her practice in the city for a month or two. In this connection the police have been of great help to me. There has, however, been a marked improvement in their recent work, for the *dais* now induce their patients to come in early and so save their lives.

I receive valuable help in the training of this class from my House Surgeon, Miss Die, and my Matron, Mrs. Newman. Both my assistants have been called out to the city to help the *dais* at the patients' homes, and have conducted the cases there. We have received a very instructive copy of midwifery diagrams for the class, and we hope to get a new magazine which is much needed.

Her Highness the Ruler of Bhopal continues to take the keenest interest in this work and is always ready to help us."

The Chief Medical Officer of the Gondal State reports briefly "that at the Gondal, beginning of December 1911 there was one female pupil under training, who passed her final examination, and was awarded a certificate.

During the year under report two female pupils were admitted. They are still under training, their progress is satisfactory, and their conduct good.

The *dais* sent out from this centre are doing good work. Those under training during the year conducted 50 cases of labour under the guidance of the head *dai* of the Gondal Hospital."

The following is the report of the Chief Medical Officer and Sanitary Officer, Commissioner, forwarded by Mr. W. E. Jardine, C.I.E., Resident at Gwalior:—

"There are two classes held at present, one at Jaya Arogya Hospital, Lashkar, and the other at the Ujjain Civil Hospital.

Sixty-one *dais* have passed from the Jaya Arogya Hospital, while 25 *dais* are under training and 6 from Ujjain civil hospital, with 4 under training.

Fifteen certificated *dais* are employed by the State, and attached to dispensaries. About 600 cases have been attended by these and others working independently in the towns. The Dhanok and Basore (indigenous *dais*) are hard-working, but not amenable to discipline, or of cleanly ways. It has been found difficult to recruit a large number from this class and the majority have to be selected from other classes. It would be better, in my opinion, if preference was given to those having some previous education.

We have had some disappointments in the training of *dais*, but the successes far outweigh the failures. There is a growing demand for trained *dais*, and very encouraging reports are received from the patients they attend. Some of the high-class *dais* have also proved to be very efficient nurses and the work of the Association is making very steady progress in the State."

Hyderabad.

Lieutenant-Colonel P. J. Lumsden, I.M.S., the Residency Surgeon, forwards the annual statement by the Senior Visiting Surgeon :—"At the beginning of December 1911, there were 12 *dais* under training and 7 admitted during the year, making a total of 19. Of these, 9 went up for examination and passed. Diplomas will be given to them after completing their chemical study. Four are still under training, having a surplus of 6 to be accounted for. Of these, some left without any cause being assigned, and others were discharged as unfit for work.

During the year the *dais* attended 225 classes, and the total number of maternity cases attended by the *dais* during the year is 799.

We continue to keep in touch with some of the certificated *dais*, and are able to recommend them for outside cases when our staff is insufficient. Very few *dais* were required from March to June, the hot months of the year, but at other times the demand for them is usually greater than the supply, and their services are greatly appreciated.

Public confidence in the institution is steadily growing, and the number of normal cases is increasing. Bazar *dais* frequently recommend difficult labours to attend the Hospital instead of, as formerly, attempting everything themselves.

A number of passed *dais* are working in the districts, principally at State Dispensaries, and some are practising on their own account. All those of good character and with good health are doing well. On investigation the failures are generally found to be due to personal defect, rather than to the training.

Three European pupils were also under training last year. Two of them have passed the examination and will shortly be granted Diplomas.

The epidemic of plague which broke out in Hyderabad City in September 1911 and continued for 5 months, accounts for the reduction in the number of cases during the year. Patients ceased to come in from the districts and the city itself was deserted by all who could get away.

The higher death-rate is due to the plague, and to the increase in the average of cases with complications of a serious character

The report by Major F A Smith, I M S., the Administrative Medical Indore. Officer in Central India, runs —“The class of 15 students was examined in December 1911. Of these all passed. The present class, which was opened in January 1912, consisted of 12 students”

The Chief Medical Officer, Baroda State, says.—“The class was Baroda. started on 1st November 1911, and continued throughout the year Nurse Gajrabai Mane gave lectures and demonstrations, and also taught the *dais* practical work. A comprehensive table is given, illustrating the number of lectures delivered, and the lectures attended by each candidate. The lectures totalled from 12 to 14 each month, and the average of attendances was very good.

The Lady Doctor examined the class six times in the year under report, but as the candidates had not completed a period of three years, the final examination was not held this year.

The sum received during the year under report was Rs700 With a balance of Rs-12-9 in this office and Rs1,532-1-9 in the Treasury from last year, the total comes to Rs2,241-1-6. Out of this Rs753-7-3 were disbursed towards the maintenance of the *dai* class, leaving Rs1,487-10-3 now at the credit of this account in the Baroda Government Treasury

The average monthly cost incurred on account of each *dai* was Rs-15-4, against Rs-11-1 in the preceding year

Mr. S. M. Fraser, C I E., the Resident in Kashmir, forwards reports by the Kashmir. Superintending Surgeon, Jammu and Kashmir State Hospitals, and the Lady Superintendent of the Zenana Hospital, Srinagar. The former writes —“Regarding the report of the Victoria Memorial Scholarships Fund, though every endeavour has been made to induce the local midwives to undergo a course of training at the hands of the Lady Superintendent, it has not proved possible to do anything in this direction. Nor is the suggestion that all such women should be licensed only after undergoing a course of instruction, favourably received by the Darbar, who consider that the time has not yet arrived for enforcing a measure of the kind. The only possible alternative is to increase the number of scholarships and to thus obtain by slow degrees a class of women who will, it is hoped, in course of time, supplant the indigenous *dai*, to whom a large amount of preventable mismanagement of maternity cases in this large city, and its results both to mother and infant, is to be attributed. In consultation with the Lady Superintendent it is intended to ask for an

increased number of scholarships for Srinagar, and to show cause for their being granted if possible."

The Lady Superintendent, Zenana Hospital, Srinagar, says :—" The two Hindu *dais*, good caste Panditani women, mentioned in my report last year have remained on, and are still under training ; one of the other *dais* left, and has been replaced. One hundred maternity cases were treated during the year, *viz.*, 32 in the Hospital and 68 in their own homes.

Kathlawar. The following brief account is submitted by Mr. J. Sladen, I.C.S., Agent to the Governor :—

Major W. M. Houston, I.M.S., Agency Surgeon, writes :—The Dufferin Fund probationer referred to in the last year's report is still under training at the West Hospital, Rajkot, and Rasulkhanji Hospital for women.

As before, the officer in charge Rasulkhanji Hospital has kindly undertaken the practical midwifery part of the training, thus providing adequate obstetrical teaching. The nurse attached to the West Hospital, Rajkot, gives the necessary training in general nursing."

Mysore. Mr. P. S. Achyuta Rao, the Honorary Secretary, Mysore Centre, writes as follows :—" From the statement enclosed it will be seen that there is a balance of only Rs. 1,102-3-9.

Out of 5 pupils, 1 died, 1 passed and 3 are under training. During the year under report 2 Female Dispensaries were opened : one at Chickaballapur on 2nd February 1912 and the other at Sagar on 13th May 1912. Every endeavour is being made to afford medical aid to the women in all villages in the Mysore territory. The midwifery classes are, as usual, conducted in the Maternity Hospital at Bangalore and Her Highness the Maharani's Hospital at Mysore.

Rajputana. Mr. W. H. J. Wilkinson, First Assistant Agent to the Governor-General, in forwarding an encouraging report remarks :—" The Agent to the Governor-General, Rajputana, notices with satisfaction that the effects of this training are becoming apparent pretty well all over Rajputana."

Report by Lt.-Col. R. C. MacWatt, I.M.S., Chief Medical Officer :—

" *Ajmer.*—Mrs. Kane, Lady Superintendent, has been in charge of the *dai* training class, Ajmer, throughout the year. The six pupils mentioned in the last year's report as being under instruction continued to work to the end of the session, when they were examined by the Civil Surgeon, Ajmer. They all passed and obtained their certificates, and received the usual honorarium which is given to successful candidates.

Nine pupils were admitted into the current year's class, of whom five came from Udaipur, two from Alwar, one from Jhalawar, and one locally without a scholarship.

During the year 13 in-door and 43 out-door maternity cases were treated, and 112 persons sought advice and treatment.

The Lady Superintendent reports that since the inauguration of the class altogether 47 have passed, of these a few are known to be working in various dispensaries in Rajputana. Others are practising midwifery and doing well, among whom there are 12 in Ajmer, 3 at Kishengarh, 1 at Masuda, 4 at Jaipur, 3 at Jhalawar, 1 at Alwar, 4 at Beawar, 1 at Nasrabad, 2 at Udaipur, 1 at Mount Abu, 2 at Jodhpur, 2 at Shahpura and 3 at Sirohi. The remainder have been temporarily lost sight of.

As regards the funds of the Victoria Memorial Scholarships Fund, the opening balance to credit on the 30th November 1911 was Rs11,267-9-2, receipts Rs3,742, total Rs15,009-0-2, of which Rs3,191-5-3 was expended on the Ajmer *dai* class, against Rs2,498-1-4 in the previous year. The increase in expenditure is due to the fact that scholarships to the Native States pupils were paid at the rate of Rs15 per mensem each as sanctioned by the Hon'ble the Agent to the Governor-General in 1911. The closing balance in hand on 30th November 1912 was Rs11,817-10-11.

Jaipur.—Four pupils who were under training in the Ajmer *dai* class passed their examination in April 1912, of whom one has been retained at the Mayo Hospital at Jaipur as a permanent *dai*, and two are working privately in the city. One *dai* is being trained in the new class at the Mayo Hospital, Jaipur, to prepare herself for admission into the *dai* class, Ajmer. The *daes* that are trained and employed in the hospital are paid by the Jaipur State.

Tonk.—The *dai* class has been continued throughout the year. Four *daes* were trained, of these three passed their final examination which was conducted by the Assistant Surgeon in charge of the Saddar Dispensary at Tonk.

Kotah.—No *dai* class was started in the Victoria Jubilee Female Hospital at Kotah during the year.

Bharatpur.—The question of reorganisation of the local *dai* class in the Female Dispensary at Bharatpur is under consideration."

E. J. BUCK,
Secretary.

SIMLA:

The 12th April 1913.

VICTORIA MEMORIAL SCHOLARSHIPS FUND

Progress of Various Branches.

Victoria Memorial Scholarships Fund.

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1912.

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.						RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Others (not included in columns 2 and 3) still under training.	Period of duration of each course.	During year ending 30th November 1912.		Since formation of branch to 30th November 1912.		During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Balance in hand on 30th November 1912.	Average monthly cost of each pupil during training.			
						(a) From Executive Committee.	(b) From other sources.	(a) From Executive Committee.	(b) From other sources.							
1	2	3	4	5	6	7		8		9	10	11	12	13		
Bengal.																
Calcutta	Feb. 1903	4	25	...	...	680 0 0	...	11,147 0 0	815 4 2	...	11,682 4 2	R a. p. 100 0 0	R a. p. ...	No class formed during the year.
Burdwan	16th Oct. 1903.	...	...	...	...	...	...	...	490 0 0	...	122 1 0	387 15 0	...	Do. do.
Dibrang-Suri	11th June 1907.	...	9	...	...	43 0 0	150 2 3	263 0 0	735 15 3	*44 2 0	619 7 9	379 7 6	...	* Spent in the purchase of instruments, etc., which were supplied to the 3 girls who passed out in August 1911.
Burkara	1st Oct. 1903.	1	11	2	...	...	78 0 0	200 5 6	829 14 4	76 0 0	1,023 3 10	7 0 0	4 0 0	Closed.
Midnapur	5th July 1906.	...	7	...	...	...	...	291 0 0	400 7 2	...	630 1 1	61 6 1	...	

PROGRESS OF THE VARIOUS BRANCHES.

PROGRESS OF THE VARIOUS BRANCHES.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Branch.	4th Sep 1902.	1st July 1903	10th Dec. 1902	31st Oct. 1903	3rd Mar 1903	5th June 1903	7th April 1903	1902	Total	13 th	17 th	14	No class formed during the year.			Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.		Do do.			

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1912—*contd.*

Stations where classes formation of branch.	Date of formation of branch.	PUPILS TRAINED.					RECEIPTS.				EXPENDITURE.				REMARKS.
		Duration ending 30th Nov-ember 1912.	From formation of branch to 30th Nov-ember 1912.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1912.		Since formation of branch to 30th November 1912.		Duration ending 30th Nov-ember 1912.	From formation of branch to 30th Nov-ember 1912.	Balance in hand on 30th Novem-ber 1912.	Average monthly cost of each pupil during training.		
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.						
1	2	3	4	5	6	7		8		9	10	11	12	13	
Benar.															
Amroli	22nd July 1902.	2	38	...	1 year	R a. p. 925 0 0	R a. p. 79 13 7	R a. p. 10,177 2 6	R a. p. 64 13 7	R a. p. 722 4 0	R a. p. 8,094 0 8	R a. p. 1,277 15 6	R a. p. 30 1 6		
	TOTAL	2	38	...	1 year	925 0 0	79 13 7	10,177 2 6	64 13 7	722 4 0	8,094 0 8	1,277 15 6	...		
Bihar & Orissa.															
Bankpur	1st July 1907.	1	10	3	1 year	...	119 8 2	628 12 0	876 8 2	119 8 2	1,502 3 3	3 0 11	6 0 0		
Gaya	6th June 1904.	1	14	2	1 year	40 0 0	144 0 0	1,006 0 0	1,189 5 0	201 10 4	2,101 11 11	93 12 1	8 6 3		
Arrah	24th April 1908.	...	4	3	2 years	252 0 0	1 10 0	1,047 0 0	*11 10 0	248 6 4	1,008 5 7	50 6 2	...	*Includes interest of Rs 1-10-9.	
Champaran.	1st Feb. 1903.	...	19	...	...	...	...	102 9 0	400 8 0	...	512 1 0	...	...	No class formed during the year; Rs 120 have been given to Civil Sur-geon during the year to form a class at Bettiah.
Saran	13th May 1902.	5	3	10	1 year	65 0 0	1,534 0 0	214 8 0	15,104 15 6	1,162 7 9	11,185 3 10	4,134 8 8	7 13 0		

PROGRESS OF THE VARIOUS BRANCHES.

[illegible]

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1912—*contd.*

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.				RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Others (not included in column 3 and 4) still under training.	Period of duration of each course.	(a) From L. Committee.	(b) From other sources.	Since formation of branch to 30th November 1912.	During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Balance in hand on 30th November 1912.	Average monthly cost of each pupil during training.		
1	2	3	4	5	6	7	8	9	10	11	12	13		
Burma.														
Rangoon	21st Feb. 1905.	11	46	10	1 year	1,820 0 0	11,458 5 4	1,321 0 0	11,458 5 4	...	...	...	The girls undergoing training here are mostly Burmese, Karens and a few Eurasians. The 10 girls under training now are 6 Burmans, 4 Karens and 1 Arakanese.
		TOTAL	11	46	10	...	1,820 0 0	11,458 5 4	1,321 0 0	11,458 5 4	...	...	...
Central Provinces.														
Jubbulpore	1st Dec. 1904.	3	13	2	18 months.	...	1,500 0 0	95 0 4	1,316 2 2	163 13 10	6 0 0	...		
		TOTAL	3	13	2	...	...	1,500 0 0	95 0 4	1,316 2 2	163 13 10	...	...

PROGRESS OF THE VARIOUS BRANCHES.

Branch	Date	United Provinces.										Total	Incl. cost of diagrams.
		1st Jan. 1903.	1st Nov. 1903.	1st Dec. 1903.	1st Jan. 1904.	1st Feb. 1904.	1st Mar. 1904.	1st Apr. 1904.	1st May 1904.	1st Jun. 1904.	1st Jul. 1904.		
Agre	1st Jan. 1903.	1	14	20	423 11 10	423 7 6	4160 3 9	423 11 10	4160 3 9	423 11 10	4160 3 9	423 11 10	4160 3 9
Cawnpore	1st Nov. 1903.	3	10	20	1740 0 0	268 10 4	2,394 8 9	2,394 8 9	2,394 8 9	2,394 8 9	2,394 8 9	2,394 8 9	2,394 8 9
Lucknow	28th Sep. 1903.	2	7	3	490 0 0	820 5 11	3,217 0 1	1,880 4 8	1,300 5 11	5,007 4 9	22 0 0	13 0 0	13 0 0
Allahabad	1st Sep. 1903	—	0	2	300 3 0	—	3,002 7 4	—	340 3 0	3,474 4 2	218 3 2	14 15 4	14 15 4
Total		7	24	20	2,238 9 2	1,313 13	6,424 3 11	2,566 12 2	4,534 10 7	23,505 12 6	1,004 3 8	—	—
Punjab.													
Amritsar	1st Jan. 1903.	1	8	4	24 0 0	90 0 0	1,340 2 0	1,340 2 0	1,340 2 0	1,340 2 0	1,340 2 0	1,340 2 0	1,340 2 0
Simla	1st Oct. 1903.	6	71	1	763 0 0	1,617 0 0	109 0 0	109 0 0	123 0 0	1,158 0 0	764 4 0	5,800 12 0	284 4 0
Ludhiana	1st Nov. 1903.	11	83	24 & 25	1,454 5 4	2,225 0 0	6,740 2 7	3,120 0 0	3,680 5 4	11,800 2 11	—	—	—
Ferozepore	1st Jan. 1903.	11	23	9	414 8 0	—	—	—	—	—	—	—	—
Lahore	1st Jan. 1903.	17	1	1	151 11 0	—	—	—	—	—	—	—	—
Amritsar	1st Feb. 1903.	6	14	6	9 11 11	—	—	—	—	—	—	—	—
Amritsar	1st Sep. 1903.	20	—	—	—	—	—	—	—	—	—	—	—
Total		33	85	—	2,806 8 4	2,434 0 0	23,633 1 8	3,256 8 6	5,142 12 4	31,025 6 6	284 4 0	—	—

5 1 0 Including cost of diagrams.

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1912—*contd.*

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1912.														
Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.				RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1912.		Since formation of branch to 30th November 1912.		During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Balance in hand on 30th November 1912.	Average monthly cost of each pupil during training.	
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.					
1	2	3	4	5	6	7	8							13
Baluchistan.														
Quetta.	15th Feb. 1907.	2	5	3	2 years	R a. p. 1,453 0 0	R a. p. ...	R a. p. 0,910 0 0	R a. p. ...	R a. p. 1,003 6 0	R a. p. 0,101 5 6	R a. p. 724 10 0	R a. p. 44 8 7	The cost of 2 days only is borne by this Fund.
Sibi.	1st Jan. 1907.	none	4	3	2 years	222 0 0	...	1,353 0 0	54 0 0	235 1 2	1,278 0 10	103 6 11	0 14 0	
TOTAL.		2	9	6	...	1,710 0 0	...	11,304 0 0	54 0 0	1,841 7 2	10,460 15 4	883 1 5	...	
Baroda.														
Baroda	1st Nov. 1902.	...	47	7	3 years	700 0 0	...	7,926 0 0	...	753 7 3	6,438 5 0	1,487 10 3	8 15 4	
TOTAL.		...	47	7	...	700 0 0	...	7,926 0 0	...	753 7 3	6,438 5 0	1,487 10 3	...	

The cost of 2 days only is borne by this Fund.

PROGRESS OF THE VARIOUS BRANCHES.

Place	Date	29	31	3	1 year	400 0 0	4670 0 0	387 3 0	4047 1 0	623 15 0	0 13 1
Rhopal	22nd July 1900.	39	91	3	..	400 0 0	4670 0 0	387 3 0	4047 1 0	623 15 0	0 13 1
	TOTAL										
Gondal Hos. Pital.	1st Jan. 1902.	1	8	2	3 years	275 0 0	2,825 0 0	164 13 0	2,460 15 11	144 0 1	4 9 4
	TOTAL										
Zachar and Udaipur.	23rd Apr. 1902.	2	67	29	3 years	3,600 0 0	36,700 0 0	2,007 10 9	28,680 6 7	8,019 9 6	612 3 0
	TOTAL										
Hydrabad (Deccan).	24th Dec. 1901.	9	106	4	..	2,000 0 0	36,700 0 0	2,007 10 9	28,680 6 7	8,019 9 6	612 3 0
	TOTAL										

• Average calculated on O. S. R. 1,337-11-6, the actual pay of 1901 during the year.

† Excluding—

R. & F.	Teacher's	O. S.
pay	200 0 0	
Clerk's	300 0 0	
Pay	300 0 0	
Gency		
Total	600 0 0	

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1912—*concl'd.*

Stations where classes formation of branch are held.	Date of formation of branch	PUPILS TRAINED.				RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1912.		Since formation of branch to 30th November 1912.	During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Balance in hand on 30th November 1912.	Average monthly cost of each pupil during training.		
						(a) From E. Committee.	(b) From other sources.							
													(a) From E. Committee.		(b) From other sources.
1	2	3	4	5	6	7	8	9	10	11	12	13		
Indore .	8th April 1902.	15	187	11 months.	9	1,450 0 0	...	16,250 0 0	2 6 0	1,333 0 6	15,548 1 6	704 4 6	8 2 10	
	TOTAL	15	187	11	...	1,450 0 0	...	16,250 0 0	2 6 0	1,333 0 6	15,548 1 6	704 4 6	...	
Srinagar	15th Jan. 1901.	...	23	5	2 years	...	474 8 0	315 0 0	4,844 6 0	474 8 0	5,169 0 0	...	7 14 6	
	TOTAL	...	23	5	...	...	474 8 0	315 0 0	4,844 6 0	474 8 0	5,169 0 0	...	...
Rajkot .	1st June 1902.	1	2	1	1 year	102 0 0	10 10 4	1,075 0 7	26 6 6	109 0 10	664 14 6	436 8 7	14 1 5	
	TOTAL	1	2	1	...	102 0 0	10 10 4	1,075 0 7	26 6 6	109 0 10	664 14 6	436 8 7	...	

PROGRESS OF THE VARIOUS BRANCHES.

Mysore Bangalore	1st July 1901	1	21	3	24 months	500 8 0	Mysore.	300 8 4	6,003 1 1	1,102 3 0	10 0 0
Total	1	21	3			500 8 0	7,105 4 10				
Alwar	1st April 1903	43	90	10 months	2,743 0 0		Rajputana.	300 8 4	6,003 1 1	1,102 3 0	
Tonk	3	..	1								
Total	9	43	10		2,743 0 0		36,646 8 0	175 6 0	3,191 5	3,25,304 3	111,817 10 11
GRAND TOTAL	181	1,305	217	..	23,793 13 5	6,085 3	2,41,009 15 5	33,545 8 0	175 6 0	3,191 5	3,25,304 3
							61,553 13 10	22,104 3	8,340,361 15	2,50,238 14 5	

* Of these, one is working without a scholarship.

* Of these, one is working, without a scholarship.

Annual Statement regarding the training of Indian Midwives for the period ending 30th November 1912—continued.

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THE VICTORIA MEMORIAL SCHOLARSHIPS FUND.

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.				RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1912.		Since formation of branch to 30th November 1912.		During year ending 30th November 1912.	From formation of branch to 30th November 1912.	Balance in hand on 30th November 1912.	Average monthly cost of each pupil during training.	
						(a) From E. Committee.	(b) From other sources.	(c) From E. Committee.	(d) From other sources.					
1	2	3	4	5	6	7	8			9	10	11	12	13
Indore.	8th April 1902.	15	187	11	9 months.	1,450 0 0	...	16,250 0 0	2 0 0	1,333 0 6	16,548 1 6	704 4 6	8 2 10	
	Total	15	187	11	...	1,450 0 0	...	16,250 0 0	2 0 0	1,333 0 6	16,548 1 6	704 4 6	...	
Srinagar	15th Jan. 1901.	"	23	5	2 years	...	474 8 0	315 0 0	4,844 6 0	474 8 0	5,150 0 0	...	7 14 6	
	Total	...	23	5	...	...	474 8 0	315 0 0	4,844 6 6	474 8 0	5,150 0 0	...	...
Rajkot.	1st June 1902.	1	2	1	1 year	102 0 0	10 10 4	1,075 0 7	26 6 6	169 0 10	664 14 6	436 8 7	14 1 6	
	Total	1	2	1	...	102 0 0	10 10 4	1,075 0 7	26 6 6	169 0 10	664 14 6	436 8 7	...	

Mysore Bangalore	1	21	3	24 months	608 8 0	Mysore.				389 8 4	6,003 1 1	1,102 3 0	13 0 0
						..	7,105 4 10						
Total	1	21	3	...	608 8 0	..	7,105 4 10			389 8 4	6,003 1 1	1,102 3 9	
Rajputana.													
Almer	6	43	9	10 months	3,742 0 0	...	36,943 8 0	175 6 0	3,191 5	3,235,304 3	111,817 10 11	46 0 0	* Of these, one is working, without a scholarship.
Tank.	3	..	1	
Total	9	43	10	...	3,742 0 0		36,943 8 0	175 6 0	3,191 5	3,235,304 3	111,817 10 11		
GRAND TOTAL	131	1,325	217	.	23,708 12 6	0,935 3	32,41,609 15 5	41,533 13 10	25,104 3	82,40,365 15	2,36,236 14 5		

VICTORIA MEMORIAL SCHOLARSHIPS FUND.

Statements of Accounts for the year 1912.

THE VICTORIA MEMORIAL SCHOLARSHIPS FUND.

Memorial Scholarships Fund during the year 1912.

PAYMENTS.		Details	TOTAL
		R a p.	R a p.
<i>Objects of Fund—</i>			
<i>Grants-in-aid—</i>			
Baluchistan			
Barda			
Bengal		1,710 0 0	
Derar		700 0 0	
Bhopal		1,587 0 0	
Burma		925 0 0	
Central Provinces		460 0 0	
Gondal		1,320 0 0	
Gwalior		781 0 0	
Hathwa		275 0 0	
Hyderabad		3,500 0 0	
Indore		1,500 0 0	
Junagadh		1,717 0 0	
Mysore		1,450 0 0	
Punjab		193 0 0	
Rajputana		600 0 0	
United Provinces		3,407 0 0	
Bihar and Orissa		3,742 0 0	
Miscellaneous		3,434 0 0	
		919 9 0	
		...	
		28,199 9 0	
<i>Expenses of Fund—</i>			
Salaries of Office Establishment		1,763 8 0	
Office Contingencies, including postage, telegrams, etc.		420 10 0	
Commission on investments, realizing interest, etc.		204 14 10	
		2,385 0 10	
		30,594 9 10	
		422 12 8	
		31,017 6 6	
<i>Closing Balance on 31st December 1912</i>			
	TOTAL		
	TOTAL		

B. W. MARLOW, Colonel,
Honorary Treasurer.

Progressive Account of the Victoria Memorial

RECEIPTS.	Ledger folio.	Amount.
		<i>R a. p.</i>
<i>Income of Fund—</i>		
Subscriptions	3	6,91,061 1 11
Interest on Investments	121	3,15,852 13 8
Sundry Receipts	10	2,202 3 10
<i>Profit and Loss on Investments—</i>		
Net profit	90	8,701 2 0
TOTAL	10,17,817 5 5

THE VICTORIA MEMORIAL SCHOLARSHIPS FUND.

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Scholarships Fund up to the 31st December 1912.

EXPENDITURE

	Ledger folio	Amount
<i>Investments—</i>		<i>R a. p.</i>
4% Calcutta Municipal Debentures of 1899-1900	16	25,000 0 0
4% Ditto ditto of 1897-98	81	15,000 0 0
4% Ditto ditto of 1903-04	83	12,000 0 0
4 1/2% Rangoon Municipal Debentures of 1900	19	62,000 0 0
4% Calcutta Port Trust Debentures of 1895	17	5,000 0 0
4 1/2% Rangoon Municipal Debentures of 1904	88	2,85,450 0 0
4% Madras Municipal Debentures of 1903	75	1,96,950 0 0
6% Loan to Ajadha Estate, Court of Wards United Provinces	98	1,00,000 0 0
		7,01,490 0 0
<i>Objects of Fund—</i>		
<i>Grants-in-aid—</i>		
Baluchistan	94	11,280 0 0
Baroda	68	7,926 0 0
Bengal	54	29,107 0 0
Berar	62	10,175 8 0
Bhopal	48	4,670 0 0
Burma	117	10,844 2 8
Central Provinces	44	9,498 0 0
Gondal	46	2,625 0 0
Gwalior	50	39,500 0 0
Hathwa	56	16,500 0 0
Hyderabad	40	19,028 8 0
Indore	52	16,250 0 0
Junagadh	60	2,016 0 0
Kashmir	69	315 0 0
Mysore	42	7,100 0 0
Punjab	74	29,771 8 0
Rajputana	72	86,946 8 0
United Provinces	66	27,673 0 0
Bihar and Orissa	124	919 9 0
Miscellaneous	96	8,925 1 2
Profit and Loss	63	100 0 0
		2,90,170 12 10
<i>Expenses of Fund—</i>		
Permanent advances	57	100 0 0
Salaries, wages, and travelling expenses of Office Establishment	103	14,923 8 0
Office Contingencies, including postage, telegrams, etc	100	4,614 8 2
Commission on investments, realizing interest, etc	112	4,595 11 9
Office Building	100	1,500 0 0
		25,733 11 11
		422 12 8
		10,17,817 5 8
Closing Balance on 31st December 1912		
TOTAL		

B. W. MARLOW, Colonel,
Honorary Treasurer.

Investment Account of the Victoria Memorial Scholarships Fund.

	Nominal Value.		Cost.	
	R	a. p.	R	a. p.
4% Calcutta Municipal Debentures of 1899-1900	.	.	25,000	0 0
4% Ditto of 1897-98	.	.	15,000	0 0
4% Ditto of 1903-04	.	.	12,000	0 0
4% Calcutta Port Trust Debentures of 1895	.	.	5,000	0 0
4% Madras Municipal Debentures of 1903	.	.	1,95,000	0 0
4½% Rangoon Municipal Debentures of 1900	.	.	62,000	0 0
4½% Rangoon Municipal Debentures of 1904	.	.	2,59,500	0 0
Loan at 6% per annum to Ajudhia Estate, United Provinces Court of Wards	.	.	1,00,000	0 0
Total	.	.	6,73,500	0 0

DELHI:

M. F. GAUNTLETT,
*Comptroller and Auditor-General.*B. W. MARLOW, *Colonel,*
Honorary Treasurer.

The 24th February 1913.

CALCUTTA
SUPERINTENDENT GOVERNMENT PRINTING, INDIA
8, HASTINGS STREET

Co-operation with Medical Officers of Government.

20. All persons employed by the Association will ordinarily be expected to act in co-operation with, and, where necessary, in subordination to the Medical Officers of Government.

Bankers.

21. The Bankers of the National Association shall, until it is otherwise arranged by the Central Committee, be the Bank of Bengal in India, and Messrs. Coutts & Co. in England.

22. No alteration shall be made in the above Rules and Regulations, except by the vote of a majority of the members present at a Special Meeting called for that purpose as hereinbefore provided.

WITNESS.

HARRY COOPER, *Major,*
Loyal North Lancashire Regiment.

SIGNATURES.

HARRIOT DUFFERIN.
ANDREW R. SCOBLE.
C. U. AITCHISON.
JOTENDRA MOHUN TAGORE.
B. SIMPSON.
DINSHAW MANECKJEE PETIT.
CHARLES H. MOORE.

NOTE.—Rules 14 and 18 were amended as above at a General Meeting of the Association held at Government House, Calcutta, on the 14th February 1908.

Rule 20 was amended as above at a Special Meeting of the Association held at Government House, Calcutta, on the 6th March 1912

HER MOST GRACIOUS MAJESTY QUEEN
ALEXANDRA.

Patrons.

HER MOST GRACIOUS MAJESTY QUEEN
MARY.

Patron in India.

HIS EXCELLENCY THE RIGHT HON'BLE THE BARON HARDINGE OF PENSHURST, P.C., G.C.B.,
G.M.S.I., G.C.M.G., G.M.I.E. G.C.V.O., I.S.O., ETC., VICEROY AND GOVERNOR-GENERAL OF
INDIA.

Lady President.

HER EXCELLENCY THE LADY HARDINGE OF PENSHURST, C.I.

Vice-Patrons.

H. R. H. Field Marshal THE DUKE OF CONNAUGHT AND STRATHEARN, K.G., K.T., K.P., G.C.S.I.	The Right Hon. Lord HARRIS, G.C.I.E.
The Most Hon. the MARQUESS of LANSDOWNE, K.G., G.C.S.I., G.C.I.E.	The Right Hon. Lord WENLOCK, G.C.I.E.
The Right Hon. the EARL of ELGIN and KINCARDINE, K.G., G.C.S.I., G.C.I.E.	Sir JAMES LYALL, K.C.S.I.
The Right Hon. Lord REAY, G.C.I.E.	Sir ALFRED LYALL, K.C.B.
The Right Hon. EARL CURZON OF KEDLESTON, P.C., G.C.S.I., G.C.I.E.	H. H. the MAHARAJA of TRAVANCORE, G.C.S.I.
Sir STEUART BAYLEY, K.C.S.I.	H. H. the MAHARAJA of JAIPUR, G.C.S.I.
Sir AUCLAND COLVIN, K.C.M.G.	The Hon. the MAHARAJA of VIZIANAGRAM, K.C.I.E.
H. H. the NIZAM of HYDERABAD, G.C.B., G.C.S.I.	H. H. the MAHARAJA of KASHMIR, G.C.S.I.
H. H. the GARKWAR of BARODA, G.C.S.I.	The MAHARAJA of DARBHANGA, K.C.I.E.
H. H. the MAHARAJA of JODHPUR, G.C.S.I.	H. H. the MAHARAJA of BENARES, K.C.I.E.
H. H. the MAHARAJA of UDAIPUR, G.C.S.I.	The Right Hon. the EARL of MINTO, P.C., G.C.S.I., G.C.M.G., G.C.I.E.
H. H. the MAHARAJA SCINDIA of GWALIOR, G.C.S.I.	

Vice-Patronesses.

H. R. H. THE DUCHESS OF CONNAUGHT AND STRATHEARN, C.I.	Lady JAMES LYALL
The Most Hon. the DOWAGER MARCHIONESS OF DUFFERIN and AVA, V. & A, C.I.	The Most Hon. the MARCHIONESS of RIPON, C.I.
The Most Hon. the MARCHIONESS of LANSDOWNE, C.I.	The Lady EMMA BARING, C.I.
The Lady REAY, C.I.	Lady GRANT DUFF, C.I.
The Right Hon. the COUNTESS of LYTTON, C.I.	Lady AITCHISON
The Lady RANDOLPH CHURCHILL, C.I.	Her Highness the NAJBAB SHAMS-I-JAHAN
H. H. the MAHARANI of JODHPUR.	BEGUM SAHIBA, of MURSHIDABAD, C.I.
The Lady WENLOCK, C.I.	The Lady AMPHILL, C.I.
Lady BAYLEY.	H. H. the MAHARANI CHINKU RAJA SAHIBA of GWALIOR.
Lady LYALL.	H. H. the MAHARANI SAKHUJA RAJA SAHIRA
Lady ELLIOTT.	SINDHIA ALIJA BAHADUR, of GWALIOR, C.I.
H. H. the NAWAB BEGUM of BHOPAL.	The Lady NORTHCOTE, C.I.
H. H. MAHARANI KENFANANJAMMANI VANI-VILAS SANNIDHANNA of MYSORE, C.I.	H. H. the MAHARANI of HUTWA, C.I.
H. H. the NAWAB KHYRUN-NISA BEGUM of the CARNATIC.	The Right Hon. the COUNTESS of MINTO, C.I.

And such other persons of position and influence, both English and Indian, as may from time to time be specially invited by the Central Committee to become Vice-Patrons and Vice-Patronesses of the Association.

CENTRAL COMMITTEE.

Lady President.

HER EXCELLENCY THE LADY HARDINGE OF PENSHURST, C.I.

Members.

The Hon'ble Sir J. L. JENKINS, K.C.S.I., *Member of the Viceroy's Council.*

The Hon'ble Sir S. H. BUTLER, K.C.S.I., C.I.E., *Member of the Viceroy's Council.*

The Hon'ble Surgeon-General Sir C. P. LUKIS, K.C.S.I., *Director-General of the Indian Medical Service.*

The Hon'ble Lt.-Col. Sir H. McMAHON, G.C.V.O., K.C.I.E., C.S.I., *Secretary to the Government of India, Foreign Department.*

Dr. K. O. VAUGHAN, M.B.

Mr. S. P. SINHA.

Raja Sir HARNAM SINGH, K.C.I.E., Ahluwalia, of Kapurthala.

The Hon'ble Sir G. R. M. CHITNAVIS, K.C.I.E.

The Hon'ble Nawab MUMTAZ-UD-DAULA, Sir MUH'D FAIYAZ ALI KHAN, K.C.V.O., K.C.I.E., C.S.I.

The Hon'ble Maharaja Dhiraj Bahadur Sir BIJAY CHAND MAHTAB, of Burdwan, K.C.S.I., K.C.I.E., I.O.M.

Lt.-Col. F. O'KINEALY, I.M.S., Surgeon to His Excellency the Viceroy.

Honorary Secretary.

Lt.-Col. F. O'KINEALY, I.M.S., Viceroy's Camp.

Permanent Joint Secretary.

E. J. BUCK, Esq., Viceroy's Camp.

Permanent Assistant Secretary.

W. G. A. HANRAHAN, Esq., Viceroy's Camp.

Honorary Treasurer.

Colonel B. W. MARLOW, C.I.E., Military Accountant-General.

Honorary Auditor.

R. W. GILLAN Esq., C.S.I., I.C.S., Comptroller and Auditor-General.

Honorary Solicitors.

Messrs. SANDERSON & Co., Calcutta.

Bankers.

BANK OF BENGAL, Calcutta.

Messrs. COUTTS & Co., 59, Strand, London.

Honorary Secretaries to Branches of the Association.

United Kingdom Branch.

THE MOST HONOURABLE THE DOWAGER MARCHIONESS OF DUFFERIN AND AVA, V. & A., C.I.,
Clandeboyne, Ireland.

For the Scholarship Department.—Secretary, Mrs. Bell, 12, St. Leonard's Road, Ealing,
London.

Baluchistan.

Lt.-Col. A. L. DUKE, I.M.S., Quetta.

Bengal.

Lt.-Col. C. R. M. GREEN, I.M.S., 6, Harington St.,
Calcutta.

Berar.

Lt.-Col. H. E. BANATVALA, I.M.S., Amraoti

Bombay.

Capt. T. C. LUCAS, R.A.M.C., Govt. House.

Burma.

A. D. KEITH, Esq., Rangoon College, Rangoon.

Central Provinces.

G. SHERLOCK-HUBBARD, Esq., Nagpur.

E. B. and Assam.

Col. R. N. CAMPBELL, C.I.E., I.M.S., Shillong.

Madras.

Major F. F. ELWES, C.I.E., I.M.S., Govt. House.

Mysore.

Dr. P. S. ACHYUTA RAO, Bangalore.

N.-W. F. Province.

Lt.-Col. T. F. IRVINE, I.M.S., Peshawar.

Punjab.

Major E. C. BAYLEY, I.A., C.I.E., Govt. House,
Lahore.

U. P. of Agra and Oudh.

J. M. CLAY, Esq., I.C.S., Allahabad.

THE COUNTESS OF DUFFERIN'S FUND.

The National Association for Supplying Female Medical Aid to the Women of India.

Twenty-seventh Report of the Central Committee for the year 1911.

IN presenting its Twenty-seventh Annual Report of the National Association for providing Female Medical Aid to the Women of India the Central Committee is glad to be able to again present a statement indicating steady progress throughout the country.

The objects for which the Victoria Memorial Scholarships Fund was inaugurated are now being gradually attained in various centres in India, and a separate account of the work accomplished in this direction is again given under a special heading at the end of this volume.

The report contains the statistics and details of the main operations of the Fund during the past year, and it also includes a précis of the work accomplished in the United Kingdom and in Baluchistan, Mysore, North-West Frontier Province and certain Native States which do not publish separate reports. Those who are interested in the details of relief which has been afforded in Bengal, Berar, Bombay, Burma, the Central Provinces, Eastern Bengal and Assam, Madras, the Punjab, and the United Provinces of Agra and Oudh can obtain the provincial reports through the respective Honorary Secretaries of these branches.

During the year under review Her Imperial Majesty Queen Mary, the Patron of the Association, visited India, and while in Calcutta paid visits to the Victoria Dufferin Hospital, the Medical College Hospital, the Prince of Wales Hospital, the Eden Hospital and the Presidency General Hospital. Her Majesty enquired carefully into the progress made by the Fund during her stay in India.

Her Excellency The Lady Hardinge of Penshurst as Lady President of the Central Committee made inspection visits to a large number of hospitals during the year. Among these institutions were the hospitals at Bombay, Calcutta, Howrah, Delhi, Agra, Simla, Lahore, and Benares. Her

Excellency has been much gratified at seeing the progress which has been made in many directions, and at the excellent work which is being performed by the Lady Doctors.

Scheme for a
Female
Medical Ser-
vice.

During the past year the very important question of improving the pay and prospects of Medical Women working in India by the formation of a Women's Indian Medical Service has been thoroughly ventilated by the Central Committee.

In the annexures later on in this report will be found a despatch, dated 16th December 1910, from the Secretary of State to the Government of India, forwarding the draft of a scheme for the formation of a Medical Service which was submitted to Lord Morley by some ladies interested in the practice of medicine in India and England.

Together with this scheme is published a note drawn up by Surgeon-General Sir C. P. Lukis showing what the approximate cost of such a scheme would probably amount to. At a meeting of the Central Committee of the Countess of Dufferin's Fund, held at Government House, Calcutta, on the 23rd January 1911, over which Her Excellency The Lady Hardinge of Penshurst presided, the Committee fully discussed the despatch alluded to. In the course of its report, which was completed on the 7th June 1911, a Sub-Committee consisting of the Lady President, the Hon'ble Mr. S. H. Butler, the Hon'ble Surgeon-General C. P. Lukis and Colonel O'Kinealy, later on wrote:

"We have no doubt whatever that the present provision for female medical aid is totally inadequate and unsatisfactory. The country is advancing rapidly and the spread of the knowledge of the western system of medicine is now very remarkable. This directly affects the women of India and has raised the standard of medical demands. We consider, therefore, that in order to secure a proper stamp of practitioner, it is absolutely necessary to improve the pay and prospects of the medical women serving under the Association, and we submit a draft scheme prepared by Surgeon-General Lukis, together with a note by the Joint Secretary, with reference to the areas within the limits of which its operations should be confined. After discussing Surgeon-General Lukis' scheme, we consider that the sum of Rs 41,400, estimated for charge allowances, is perhaps not essential, and may be for the present omitted from the calculation. This reduces the total to Rs 4,32,200, and after deducting therefrom the sum of Rs 1,39,344 already defrayed, there remain Rs 2,92,856, or say 3 lakhs, to be made up in each year. This is a large sum which we are not likely to raise entirely by public subscription. We therefore advise that local Governments should be asked how far they are prepared to contribute. The urgent need of the fund, its present stationary character, the discontent in the service of the lady doctors—voiced both in India and in England—the diffi-

culty of recruitment, etc., are, as we have already pointed out, strong grounds for further assistance on a liberal scale

"As regards the improvement of the class of Indian lady doctors, enquiries are being made from the various teaching institutions, but we do not consider it necessary to delay our report on this account."

During the past year the Provincial Branches were all consulted on the question of a service, were asked to state their probable requirements, and were also requested to state what financial assistance, if any, they could guarantee towards the scheme. Their replies, which have all intimated their inability to assist financially, together with a communication from the Central Committee of the Association, have since been forwarded to the Government of India.

In a letter dated 16th November 1911 to the Government of India, the Central Committee stated that it had given very careful consideration to the despatch from the Secretary of State. It wrote:

"We agree that insuperable difficulties lie in the way of any scheme for the formation of a Women's Indian Medical Service, such as was proposed in the Memorial attached to the despatch. We think, however, that the present range and quality of the Dufferin Fund activities are no longer equal to the demands of the time.

"In saying this, we have no desire to underrate the notable work that has been accomplished. The Dufferin Fund has a record of which any institution might be proud. It has pioneered medical work amongst women in India. At the present moment, as shown in the Central Committee's Annual Report for 1910, its operations extend over 13 provincial branches, 140 local or district associations and committees, 160 hospitals, wards or dispensaries, with more than a million of patients treated. In furtherance of the objects of the Fund some 50 lakhs of rupees have been sunk in buildings, and the same year (1910) records the training of no less than 600 female practitioners besides numerous midwives and nurses. Whatever progress there has been in the medical relief of women in India is due mainly to the beneficent work of the Dufferin Fund.

"But the very progress and success of the movement have drawn attention to the wants of the country, and created a demand for better trained and better qualified medical women. For this purpose it is absolutely necessary to improve their position and prospects. We attach a copy of the report of the sub-committee which was appointed to make proposals to this end, together with notes by the Hon'ble Surgeon-General C. P. Lukis, C.S.I., I.M.S., and Mr. E. J. Buck on which it is based. Finality is not claimed for the scheme, which will have to be discussed in detail with local committees before it can be carried out. But the committee believe that it will indicate to the Secretary of State for India

the lines upon which comprehensive reform should proceed. It will secure the freedom of action of local committees and bodies, and at the same time promote co-operation between the Central and the Provincial Committees.

"The main difficulty is that of financing the scheme. Local Governments are not at present in a position to contribute towards it; the Central Committee are at the end of their resources, and there is very little prospect of obtaining increased subscriptions from the European or Indian public. Accepting as an asset more or less assured the Rs. 1,39,344 indicated in Mr. Hanrahan's note (giving an estimate of salaries now paid in certain centres) of 11th May 1911, the introduction of the scheme involves the necessity of budgetting for an additional expenditure of Rs. 3,00,000 per annum, to provide which we must depend on the generosity of Government. The Committee fully acknowledge the necessity for reform, and feel that the scheme now put forward is the only one which will meet the pressing needs of the time. They trust that the Government and the Secretary of State will now see their way to support the efforts of so philanthropic an organisation by contributing adequately to the cost thereof."

It will be seen from the above that the Central Committee of the Dufferin Fund has by no means been deaf to the numerous representations which it has received on the subject of improving the pay and status of medical women in India. But it must also be recognised that its powers are limited to its financial resources. It has placed the position, as it has been best able, before the Government of India, and has earnestly endeavoured to secure a grant-in-aid from the Imperial revenues. The matter for the present has passed out of its hands, and the decision now rests with the Government of India and the Secretary of State.

In its report last year the Committee wrote as follows:—"With regard to the question of granting lady doctors entire control and independence of their hospitals the opinion appears to be that capable ladies holding the higher qualifications in medicine may generally be safely trusted with the internal control of their hospitals and the professional work therein. But for many weighty reasons it is thought advisable that the Civil Surgeon should as a rule be responsible for correspondence with the Government, the financial control of institutions, plans for new buildings, etc. Many ladies in some of the biggest hospitals, however, have stated that they cannot manage without the Civil Surgeon's help and advice."

During the year under review it was decided that a special meeting should be called in Calcutta in the cold weather at which an amendment should be made in Rule 20 of the Memorandum of Association which refers to the conditions under which lady doctors come out to India, and that the object of giving lady doctors who possess the higher qualifications in medicine control of their hospitals should be kept steadily in view.

The report of the *Bengal* Branch testifies to the keen interest which Sir Edward and Lady Baker always took in furthering the cause of the Association. Sir William and Lady Duke replaced them as Patron and Patroness. The report refers also to the great loss it has suffered by the death of the late Maharaja of Cooch Behar, who was always a firm and consistent supporter of the Branch. During the year the rules of 1886 regulating the administration of Dufferin Fund matters in Bengal were amended by the Committee.

Summaries
of Provincial
Branches.

The Committee in dealing with the question of the desirability of a graded medical service for women regrets its inability on financial grounds to accept any additional responsibility in respect of the lady doctor in charge of the Victoria Dufferin Hospital, Calcutta. The financial condition of the Branch, which was unsatisfactory last year, is even worse this year.

Owing to the liquidation scheme under which the Provincial funds are invested in Court of Wards Estates, and which provides for the part payment of the principal together with payment of interest, the income of the Branch is gradually dwindling, and the difficulty of finding equally good investments is a matter of much difficulty.

The cost, too, of keeping up the Dufferin Hospital is increasing yearly, and the bulk of the Bengal income is swallowed up owing to the perpetual demands from this source. The Committee recognises the importance of raising sufficient capital to make the hospital self-supporting, but to effect this purpose four lakhs of rupees would be required, and to raise this would, it is stated, be a task of considerable magnitude.

In dealing with the results of work in fourteen hospitals the report says, "that the returns from local branches tend to show that there has been steady progress throughout the province."

In nearly every institution the number of *purda nashin* cases treated during the year shows a marked increase over that of the previous year and it is gratifying to note that in many places, *viz.*, at Bhagulpore, Birbhum and Khulna amongst others, respectable *purda nashin* women of well-known families are now availing themselves of the medical aid provided by the Dufferin hospitals.

"Thus it is evident" runs the report, "that the public at large are gradually, though slowly, appreciating the value and importance of the services rendered by the Association, and as the fund was inaugurated to awaken this interest, its gradual development and the action resulting therefrom marks our success."

The report of the *United Provinces* branch is a specially interesting summary of work accomplished, and projected. Space only admits of limited notice here, but the whole report merits careful attention. The total of patients treated was 220,152, against 242,584 during 1910. The

year under review was a healthy one, and the Malaria incidence was considerably less. Forty-four travelling dispensaries which were in operation during the year no doubt also helped to diminish the attendance at standing hospitals for 301,266 persons were treated by them, of whom 49,267 were Malaria cases. The decreased attendance, it is stated, points in no way to any lessened popularity of the Dufferin Hospitals. The number of visits paid by lady doctors and female sub-assistant surgeons throughout the Province during the last two years to women at their houses was 6,297, as compared with 6,076 in the previous year. The midwifery cases have steadily increased during the last two years. As in 1910, Naini Tal again heads the list with the largest number of cases visited, 536 against 425 in the previous year. Then comes Dehra Dun (457), Lucknow (388), Allahabad (339), Meerut (325), Benares (301) and Shahjahanpur (270). Lucknow heads the list of the number of visits paid in midwifery cases (171), with Bareilly next (164). Lady Doctor Mrs. Hardy, of Bareilly, heads the list of selected operations performed with 111 operations; then comes Miss O'Brien 96, Miss Singh 92, Miss Bonnar 79, and Miss George 67. Of these 103, 35, 34, 59 and 17 were obstetric cases. Miss George performed 41 cataract cases.

The old quarters for 9 nurses at Agra have been demolished, and a sum of Rs. 19,129 has been sanctioned by Government for the construction this year of new quarters for 14 nurses. The new hospital at Bahraich is nearing completion, and will soon be occupied. At Benares quarters for two staff nurses, day ward cooly, etc., are under construction. Two purdah rooms are also being built for which Rs. 5,000 were generously given by Raja Madho Lal and Babu Moti Chand last year. A covered approach passage to the purdah wards and two drains were completed at Budaun, and the hospital at Nagina has been provided with compounders' quarters. The hospital and lady doctors' quarters at Cawnpore have been fitted with electric lights and fans, and the improvements in the operation room are nearing completion. A new operating room has been built at Fategarh. The six purdah wards at Kheri mentioned in the previous report have been erected. The new hospital at Meerut is almost complete, and at Sitapur two servants' quarters and a purdah wall have been constructed. A sum of Rs. 2,000 was bequeathed by Mrs. S. Jordan to the Meerut hospital to form a fund, the annual interest of which is to be devoted to the provision of food for the Christian sick admitted to the hospital. It is proposed to appoint a lady doctor to the Mirzapur Hospital, and a sum of Rs. 857 in increased annual subscriptions, which were promised through the mediation of Mr. Wyndham, the President of the Local Branch, has been devoted to improving the quarters of the Medical Officer in order to make them suitable for a better qualified medical woman. It is hoped that the appointment will be made during the current

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Miss J. Yerbury, M.D., has tendered her resignation at Agra, with effect from the 1st May 1912. The Provincial Committee at their meeting in February last placed on record their keen sense of the loss sustained by the Association owing to her retirement, and conveyed to her their grateful appreciation of her long and successful management of the Agra Medical School, and asked her acceptance of a bonus equivalent to six months' pay as a small token of their gratitude.

During the year a sub-committee was appointed to consider the relation between Civil Surgeons and medical women in regard to the management and control of Dufferin Hospitals, and at the meeting of the Provincial Committee in February 1912, it was resolved that the position of first class medical women should be clearly distinguished from that of all other medical women in the service of the Association, and certain resolutions were passed for the guidance of local branches of the Association under which first class medical women are employed.

The *Burma* report shows that 566 obstetrical cases were treated in the Dufferin Hospital, against 491 in the previous year, and a further steady increase is hoped for in succeeding years. The out-patient department has been open for the treatment of all classes of cases, and an increase of over 3,000 patients is recorded. During the year Miss Maclaren and Miss Brooking have been in charge of the hospital. The Dufferin Hospital has been greatly improved during the past twelve months, but its financial condition still causes the Committee much anxiety, and considerable heavy expenditure has fallen upon this hospital owing to Miss Maclaren having had to take leave on medical certificate.

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during the year. In May 1911 the latter building was handed over to the Mayo Hospital authorities to provide accommodation for their nurses and a bungalow was taken for the students, the monthly rental of which was met, together with all expenses incurred in the removal of furniture, etc., by the Government. The cost of maintaining the establishment for the Homes during the year was Rs. 1,187-13-3. Deducting Rs. 294 on account of house rent realized from the students during the year, the nett amount expended was Rs. 893-13-3. The average number of students was 7, and the cost of their maintenance was Rs. 127-11 per head per annum. In addition to this, Rs. 2,284 was paid to Messrs. Charagh Din and Sons for alterations to the Lady Lyall Home which were carried out in 1909, Rs. 260-4-4 for annual repairs and Rs. 104-15-5 on account of water supply, etc. The Punjab Government contributed Rs. 2,100, and subscriptions and donations from individuals amounted to Rs. 1,356, as against Rs. 5,815, Rs. 2,920, Rs. 716, Rs. 1,326 and Rs. 1,362, in the five previous years. Rs. 240 were contributed by the District Board, Rawalpindi, Rs. 192 by the District Board, Gujranwala, and Rs. 180 by the District Board, Attock, for female medical tuition. A sum of Rs. 240 was expended on scholarships, as compared with Rs. 738-11-4 in the previous year.

The *Berar* report states that Mr. Pamkrishna Govind Mote of Amraoti and Shegaon made a generous donation of Rs. 17,000 during the year for the establishment of a charitable female hospital at Shegaon, in the Buldana district, on condition that the Government and local bodies would bear the cost of maintaining it. The offer was accepted with thanks by the Chief Commissioner, and the hospital was placed under the control of the Dufferin Fund. At the Dufferin Hospital at Amraoti, the only hospital in Berar for women, where Miss Trewby has been in charge during the year, 4,662 patients were treated, against 4,306 in the previous year.

In the province of *Eastern Bengal and Assam* Colonel R. Neil Campbell, Inspector General of Civil Hospitals, has succeeded Mr. Briscoe as Honorary Secretary of the branch. No subscriptions or donations were received from the public during the year, and the Committee's sole income was Rs. 7,500, received from Government. The Provincial Committee attempts to pay half the pay of lady doctors and dais provided local funds provide the remainder. A considerable increase is reported in the number of patients treated in Gauhati, Jorhat, Sunamganj, Tezpur, Dhubri and Barisal, and if the Branch could command more funds there is no doubt that a good deal more useful work could be accomplished.

The *Central Provinces* report states that the Dufferin Fund institutions at Nagpur and Jubbulpore, and the aided hospital at Saugor, show good progress during the year. The hospital at Jubbulpore reports a considerable improvement over the attendance of last year. The generous

offer of Rao Bahadur Dapur Rao Dadu to endow a dispensary for women in Nagpur City has been accepted by the Provincial Committee.

In *Bombay*, where the Provincial Branch confines its attention mainly to the training of nurses, the report states that during the year there were 25 probationers at the Cama hospital, including 5 Brahmins and 2 Parsis, while several nurses came in from other hospitals for a six months course of instruction in midwifery. Excellent accounts continue to be received of the work done by the Cama trained nurses employed in the districts, and the reports of the district branches show that the services of trained midwives are slowly but surely becoming more appreciated. Any district desirous of obtaining a midwife, but unable for pecuniary reasons to do so, is certain of obtaining assistance from the Provincial Committee in Bombay, and during the year such aid was granted to four branches. Three branches are now training midwives themselves.

The sum of Rs. 7,000 was received from the Trustees of the late Mr. N. Wadia, C.I.E., to assist the training school in providing Indian nurses for Indian families, and the system is proving a remarkable success.

The local reports show that good work was accomplished at Ahmedabad, where Miss Motibai Kapadia, F.R.C.S., recently received the silver Kaiser-i-Hind medal, at Hyderabad (Sind), at Shikarpur, where a large number of purdah patients were treated, and at Surat where a new ward is being built.

The *Madras* report records steady and satisfactory progress throughout the Province. The subscriptions from the public were again *nil*, and the Provincial Committee, in stating that western treatment is increasing in popularity in the hospitals and dispensaries, reminds the Indian public that it is to them that the Association should look in the first instance for support. The Central Committee gave the Branch Rs. 335 during the year to assist it in training students at the *Madras Medical College*, as the Branch itself is only able to afford three scholarships of Rs. 25 each per mensem.

The report runs—"The backbone of the whole *Dufferin Fund* scheme is medical tuition. We cannot get on without medical women: their numbers are limited, and we have to bear in mind that those who get married as a rule fall out of the ranks of workers. The duty of the Fund then, so far as medical tuition is concerned, will be to keep the subject before every local fund, Board, and Municipal Council, and every native gentleman until every large town and Native State is supplied, or until they recognise their duties so far that our reminders will be unnecessary."

The *Victoria Caste and Gosha Hospital*, which is managed by the Provincial Committee, treated 18,910 patients during the year, of which 876 were maternity cases. The subscriptions amounted to Rs. 10,000.

this sum Rs. 2,100 was given by the Maharani of Bobbili to endow a Lady Lawley bed in the hospital. Thirty-six beds are now permanently endowed, and 18 others were supported during the year by various ladies and gentlemen. The Committee records with grateful thanks the services rendered to the Dufferin Fund by the Hon'ble Lady Lawley, and their high appreciation of the valuable advice and assistance given by her on all matters connected with the Fund. Lord and Lady Carmichael assumed the offices of Patron and Patroness on the 3rd November 1911.

There have been a considerable number of changes during the year 1911. Among the most important may be mentioned the following :—

Miss H. Lauder, L.R.C.P. & S., Superintendent of the Dufferin Hospital at Srinagar, was granted six months' leave, and arrangements were made locally to carry on the work of the hospital during her absence. Miss A. L. Mackenzie, M.D., in charge of the Lady Elgin Hospital, Gaya, was also granted leave under similar conditions.

At Bettiah, Miss L. C. Nash, M.D., was unfortunately compelled, shortly after her re-appointment to this post, to take leave on urgent private affairs, and her place has been temporarily filled by Miss M. L. Batho, L. F. P. & S.

Miss N. R. Jardine, L.R.C.P. & S., officiated for six months at Patiala, during the absence of Miss M. J. Balfour, M.B.

There is now a vacancy at the Lady Aitchison Hospital, Lahore, owing to the departure of Miss D. Pratt, M.B., and the question of a lady to succeed her is now under the consideration of the Punjab Provincial Branch.

The appointment at Fort Sandeman was held for a brief period at the close of the year by Miss K. O. Vaughan, M.B., but as the local conditions do not demand at present the services of a highly qualified lady doctor, the Political Agent in Zhob has, as an experimental measure, engaged the services of two female sub-assistant surgeons for the Female Hospital at that station.

Miss B. Griffin, M.B., has been appointed to the Female Hospital at Jodhpur, *vice* Miss J. Marsh, M.D., who resigned some time ago, and arrangements will be made as soon as possible to fill the vacancy at Udaipur caused by the retirement of Miss H. McGlashan, M.B., who has resigned on her marriage.

At Alwar it is understood that His Highness the Maharaja intends to build a new Zenana Hospital, and until this is completed, the appointment of a fully qualified successor to Miss T. Conagasaby, L.R.C.P. & S., is being delayed.

The work at the Lady Curzon Hospital, Bangalore, where Miss L. Browne, L.R.C. P. & S., has recently vacated her post, is being performed by Miss A. deSantos and Miss E. Salisbury, both of whom hold the qualification of Apothecary of the Madras Medical College.

Miss J. Yerbury, M.D., Agra, has intimated her intention of returning, after a service under the Fund of nearly 25 years, and the Central Committee desires to here recognise the very excellent work she has accomplished in the past and to express its sincere regret that she is now compelled to bring her useful career in India to an end.

At Bhopal Miss Walker, M.D., held charge of the hospital, *vice* Mrs. F. D. Barnes, who accompanied Her Highness the Begum to Europe for several months during the year

At Bahawalpur where a new hospital is being constructed the work has remained in charge of Miss Z. E. Da Costa, L. R. C. P. & S.

Miss E. A. Taylor resigned the post of House Surgeon at Rajkot during the year and has been succeeded by Miss A. Pinto

At Sholapur Miss S. R. Aga was obliged to resign her appointment owing to ill-health, and Miss C. Sunthanker, M.D., Philadelphia, has succeeded her. Miss M. A. D. Naroji, M.B., proceeded on short leave during the year, and Miss Alfred acted during her absence.

In previous reports the Committee has dealt fully with the grievances which lady doctors in India have brought forward with regard to their pay and status, and has more than once expressed its sympathy with them. In the opening paragraphs of their report the Committee explain fully how the position now stands.

For the present the Committee is constrained to repeat its remarks in earlier reports:—"The funds at the command of the Association, as will be seen from the financial statements later on, are strictly limited, and it should be clearly recognised by those who accept posts under the Fund that it is essentially a charitable and more or less struggling Association which endeavours to provide as full medical relief as possible to women of all classes in India with a comparatively very small income."

The Committee thinks it well to again point out that, owing to the steady annual increase in the number of ladies who possess the higher degrees in medicine, the Association cannot guarantee to provide employment carrying a suitable remuneration immediately it is required, or indeed within any given period. The number of appointments, especially those carrying the recognized pay of the higher grade, are strictly limited, and the most the Central Committee can do is to endeavour to fill such vacancies as arise with the best material at its disposal. In all cases when the Central Committee is asked to recommend a lady for a post in a Native State or for a particular hospital, the claims of every registered candidate for employment receive full and impartial consideration. It should also be borne in mind that the final selection and appointment of candidates for a considerable number of posts, as well as the terms during which it is considered expedient they should hold those posts rests with the local authorities concerned. The fact, moreover, that the Central Committee has

assisted students, who have been recommended by the Principals of Medical Colleges in India as likely to prove successful medical women, with scholarships during their college careers, does not in any way render the Committee responsible for providing them with permanent employment under the Association. Nor does it guarantee to provide with first grade posts immediately on their return to India ladies whom it may have recommended to the United Kingdom Branch as worthy of assistance, in order that they may take the higher degrees in medicine. It has happened sometimes during past years that ladies who have not been altogether satisfied with their posts have resigned them somewhat suddenly, sometimes before they have taken the precaution of securing the promise of a new appointment. As the supply of medical women continues to be considerably in excess of the demand, especially where the higher paid posts are in question, the Committee takes this opportunity of again warning all ladies connected with the Fund that they run considerable risk in hastily throwing up appointments, however uncongenial they may appear to be.

The Central Committee begs also to remind Honorary Secretaries of Provincial and Local Committees that a list of candidates for employment is always maintained in its office, and to state that if ladies who wish to proceed on leave would notify their desire as early as possible to their Local or Provincial Committees it would much facilitate the work of those who have to arrange for filling their posts during their absence.

In Appendix III are given details of women and children treated by female agency in zenana hospitals, wards and dispensaries throughout the country.

It will be seen that in Native States no less than 546,821 patients were treated in hospitals officered by women.

As the majority of these hospitals undoubtedly owe their origin to the efforts of the Dufferin Fund, and as a considerable number are now officered either by lady doctors nominated by the Central Committee, or by ladies who were materially assisted in their medical studies by the Association, the Committee considers that it has every right to take to itself substantial credit for the success attained in this direction.

The actual number of women treated in (a) hospitals mainly controlled and aided by the Dufferin Fund was 310,717 and the number treated in (b) hospitals assisted by the Dufferin Fund was 397,109.

The work accomplished by Missionary Societies is not here reviewed, and the tables contain no details of patients treated by many midwives who have received their training through the Countess of Dufferin's Fund.

There are moreover a number of private female practitioners in India, many of whom have been at some time or other connected with the Association, and some of whom have received scholarships and direct assistance at

Patients
treated
during the

its hands; but the Association is not in a position to obtain details of the useful work accomplished by these ladies.

The Committee trusts that Honorary Secretaries and lady doctors will continue to see that returns are submitted on the principle which has been laid down by the Government of India for the State hospitals.

One of the purposes of the returns is the comparison they afford of the work accomplished in institutions of corresponding size and scope, but such comparison is difficult, or impossible, if in one case the figures representing patients treated are the number of the total *visits* or *attendances* of new and old patients, while in another they are the number of the *individuals* or of *new patients* only. If statistics are to be of any value, they must be compiled on one uniform basis. If, for example, the same person attends for 10 days, she should not be counted 10 times, but if she reappears as a fresh case she should be counted again. The returns should include both those patients remaining from the previous year and those admitted during the year under report. The Central Committee, having had its attention drawn to the probable inaccuracy of some of the returns, again desires to make the position quite clear.

The Committee has received lists from the Provinces giving the numbers *students* of the students at present in the principal medical colleges and schools in India. These show that there are 33 European and Indian ladies training for the full M.B. course, 65 as assistant surgeons, 121 as hospital assistants, and 367 as nurses, dais and compounders.

The Central Committee assists a certain number of students in each provincial centre with scholarships to help them in their medical studies, but the demand for these awards continues to far exceed the number at the disposal of the Committee.

Of the 219 who are being trained in medical work, no less than 90 are being supported with scholarships provided by the Dufferin Fund, 57 are in receipt of Government scholarships, 9 are being trained with university or school scholarships, 16 are being educated at the expense of Native States and 4 are assisted by local District Boards and Municipalities.

All details regarding scholarships granted by the Central Committee, as also a short note of guidance for those who propose pursuing their studies in England, can be obtained on application to the Honorary Secretary of the Central Committee, or to the Principals of the Medical Colleges of Calcutta, Madras, Bombay, and Lahore, and particulars regarding those given by Provincial Committees on application to the Honorary Secretaries of Provincial Branches.

The financial statement appended shows the income and expenditure of the Central Committee for the year 1910. The credit opening balance was Rs 9,507.11 and the closing balance Rs 9,470.

The ordinary income of the Fund derived from interest on investments during the year amounted to R31,590, of which R822 pertains to Trust Funds. The other receipts include a donation of R500 from Their Excellencies Lord and Lady Hardinge, R317 contributed by Provincial branches, R100 from "a friend," and R750 "Sundry receipts."

During the year it was decided to invest a sum of R55,000 in a Court of Wards Estate, and to raise this amount certain Municipal Debentures of the nominal value of R55,000, which originally cost R54,518-12, were sold for R55,550. The sale of these debentures thus resulted in a profit of R1,031-4, and by the reinvestment of R55,000 in the Gholam Rabbani Court of Wards Estate at 6 per cent. interest per annum the income of the Fund has been increased by about R1,100 a year.

The ordinary expenditure of the Central Committee during the year was R33,843. The expenditure on grants-in-aid towards the objects of the Association amounted to R28,500, of which the following are the principal items :—

- (1) R7,200 to the United Provinces Branch for the Agra Hospital and School ;
- (2) R3,550 to the Baluchistan Branch, towards the salary of a lady doctor at Quetta, and the expenses of the Lady Dufferin Dispensary at Fort Sandeman ;
- (3) R2,800 to the Central Provinces Branch, towards the salary of a lady doctor at Nagpur, and maintenance of the Elgin Hospital at Jubbulpore ;
- (4) R1,920 to the Assam Branch, towards the salaries of the midwives at Dhubri, North Lakhimpore, Gauhati, Goalpara, and Jorhat ;
- (5) R1,740 on miscellaneous grants, including contributions towards lady doctors' expenses at Home, and R240 towards the salary of a female compounder for the Ripon Hospital, Simla.

The charges on account of salaries of lady doctors in India, debitable direct to the Central Committee, amounted to R3,650.

The Committee spent R7,075 on various scholarships, R210 on gratuities, and R242 on travelling expenses of lady doctors in India.

The total working expenses of the Fund during the year amounted to R5,344.

The Committee gives in the following table the financial position of the Association for the last year. This table shows clearly the various sources from which the income of the Fund is derived, and distinguishes between the support which is given to the Association by the Government, and the public.

Statement showing the total income of each Provincial Branch (Subordinate Branches included) for the year 1911, and the sources whence derived, viz. :—

BRANCHES.	(1)	(2)	(3)		(4)	(5)	(6)	Total of columns (4), (5), and (6)
	Funds invested	Interest from invested funds.	Donations, etc.				Grants from Municipal funds.	
	R	R	R	R	R	R	R	R
Central Committee—								
Dufferin Fund	6,28,000	30,767	2,488	33,255	.	...	...	...
Victoria Memorial Scholarship Fund	6,73,500	30,547	...	30,547	.	...	.	...
United Kingdom*	34,110	976	3,675	4,651	...	...	...	..
Bengal	89,206	3,294	10,330	13,624	3,112	5,248	1,104	9,464
Punjab	1,95,200	5,407	6,464	11,871	14,566	4,337	12,651	31,554
Madras	44,000	2,420	90	2,510	...	...	...	...
Berar	70,500	2,233	23,201	25,434	1,542	2,850	1,590	5,982
Baluchistan	22,800	728	2,089	2,817	4,340	300	2,544	7,184
Bombay	2,01,842	5,989	16,149	22,138	3,123	12,128	16,891	32,144
Eastern Bengal and Assam.	68,177	2,369	735	3,104	8,560	5,590	920	15,070
Central Provinces	1,56,741	8,028	1,593	9,621	1,440	3,421	3,510	8,371
United Provinces	3,41,223	17,982	78,470	96,452	18,200	53,956	16,063	88,219
Burma	...	280	2,241	2,521	6,000	..	6,075	12,075
Mysore	11,000	722	..	722	..	..	..	..
North-West Frontier Province.	...	...	..	..	..	...	1,402	1,402
TOTAL	25,36,209	1,11,742	1,47,525	2,59,267	60,885	87,830	62,750	2,11,465

* Figures for 1910 Those for 1911 not received in time for press.

The above statement shows the amount of support received from Government sources, as compared with that derived from invested funds and contributions from the general public, viz.:—R2,11,465 from the former and R2,59,267 from the latter.

With regard to the valuable support which has been recently given to the Dufferin Fund movement by local bodies, it may be explained that the

promoters of the Association always hoped that each year the management of female hospitals would pass more and more into the hands of the people for whose benefit the movement was organised. Lady Dufferin always recognised that the work was too large and important to depend entirely upon the precarious income derived from a subscription list, or even upon the generosity of princely donors, and in a paper which emanated from the Home Department in 1887 the attention of Municipalities was drawn to the fact that women have legitimate claims upon a portion of the funds set aside for medical purposes.

Final.

In concluding this Report, as the Committee think it advisable to furnish the means of estimating the value of the work done, it will be necessary to summarise some facts and figures of the operations of the Association.

Branches.—Including the United Kingdom Branch, there are thirteen Provincial Branches working under the Central Committee.

Committees.—Attached in some manner, or affiliated to the Provincial Branches, there are about 140 Local and District Associations or Committees engaged in furthering the objects of the Association.

Hospitals.—It will be seen that in Appendix III statistics are given of the work accomplished in about 177 hospitals, wards and dispensaries of various kinds for the treatment of women, many of which are officered by women or have women attached to them, and a number of these institutions are directly governed by or affiliated to the Association: many, however, are quite independent of it; but all are doing the same work—providing *female* medical relief to the women of the country.

Approximate value of Institutions.—Including the cost of hospitals built by the Fund, a large number of buildings which have been presented to it, and others maintained from independent sources, the total value of institutions engaged in furthering the objects of the Association is now computed at close on 53 lakhs.

Patients.—In hospitals more or less controlled and assisted by the Association or at their homes, and in Native States, about 1,254,647 women and children received medical aid during the year under review.

Lady Doctors.—Fifty-six lady doctors of the first grade, ninety-two assistant surgeons, and 342 hospital assistants, etc., besides a large number of midwives and nurses not included in these statistics, are employed in the various zenana hospitals and institutions in India.

Female Students.—The Branch returns show that, including nurses and compounders, 586 women are at present studying medicine or are undergoing training of some nature in various classes of the medical colleges, schools and hospitals in the different Provinces.

Receipts.—The total receipts of the Central Committee, since the Association was incorporated, have up to date amounted to ₹14,89,677. This

does not include a sum of nearly seven lakhs subscribed towards the Victoria Memorial Scholarships Fund which was inaugurated by Lady Curzon in 1901-02.

Disbursements.—A sum of R7,16,854 has been re-allotted by the Central Committee to Provincial Branches, or expended in grants-in-aid within their limits for various objects

Investments.—The amount now invested by the Central Committee Provincial and District Branches is R25,36,299

United Kingdom Branch.—The Report of the United Kingdom Branch included among the appendices attached to this Report, shows that the amount received by it in subscriptions and donations was £245. It also has an invested fund of £2,274.

F. O'KINEALY,
Honorary Secretary.

SIMLA;
15th April 1912.

ANNEXURE I.

INDIA OFFICE, LONDON,

16th December 1910.

**To His Excellency the Right Honourable the Governor General of
India in Council.**

My Lord,

I forward for the consideration of Your Excellency's Government and for any observations which you may desire to make upon it, the draft of a scheme for the formation of a Women's Indian Medical Service which was submitted to my predecessor by some ladies who are interested in the practice of medicine in India and in this country.

2. At an interview which was granted by Viscount Morley to the memorialists, they represented to him that The National Association for Supplying Female Medical Aid to the Women of India, otherwise known as "The Countess of Dufferin's Fund," did not meet the present requirements of India, and stood in the way of a simpler and more efficient organisation.

The National Association, it was said, was defectively organised, in that it worked through loosely affiliated provincial and local branches, over which the central committee had no control, and which were irresponsible and not infrequently capricious and inefficient bodies. It was stated that the funds of the National Association derived from subscriptions and donations were very small, that it commanded little support, and that the institutions for which it took credit were largely maintained by grants-in-aid from public revenues. It was also stated that the salaries and conditions of service offered by the Association were not such as attracted competent medical women, that money was wasted in employing incompetent women, that the privacy of hospitals for women was not respected, and that there was no proper system of inspection and supervision by means of qualified medical women.

3. The aim of the draft scheme would appear to be to bring about the absorption of the National Association in the proposed Women's Indian Medical Service, which would be to all intents and purposes a regular department of the State, and more or less a duplicate of the existing civil medical service of the country. It is true that the promoters of the scheme state that "it is not proposed that the Government shall launch out into new extensions of medical work on a large scale. Probably the first steps will be to organise the medical work which is now done by women and

bring it under the proposed conditions." Action somewhat on the line here suggested, if confined to the present field of operations of the National Association, may perhaps be desirable, if a practicable scheme can be devised. But the memorialists have in view a more ambitious and costly policy than this, and one which could hardly be carried into effect without considerable interference with the work at present done for, and appreciated by, all classes of the people of India by the existing Civil Medical Department. Moreover, while the declared policy of the Government at the present time is to encourage the growth of an independent medical profession, the measures advocated by the memorialists would tend in the opposite direction.

4. I see in fact many reasons, financial, administrative, and political which put the scheme as a whole beyond the range of practicable expedients. But I should be glad to have your views upon it, and also upon the underlying suggestion that the present provision for female medical aid in India is inadequate and unsatisfactory.

5. This will necessarily involve some consideration of the position occupied by the National Association, and of the policy which should be adopted by your Government with regard to it. The National Association has, I am advised, done a notable work in directing attention to the special needs of the women of India, in promoting the establishment both in British India and in Native States of female hospitals and female wards, in providing teaching and training in medicine and nursing for women in India and in otherwise securing medical aid for the female population. It has stimulated the generosity of the wealthier classes, and has enlisted the active sympathy and co-operation of the Indian and European community. It would be regrettable if with such a record the Association should now be found to be a spent force and an actual hindrance to the establishment of a more efficient and adequate system of female medical aid in India. But its organisation may be defective, it may aim at more than it is capable of managing, or it may no longer command the requisite support. These points deserve investigation.

I have the honour to be,

My Lord,

Your Lordship's most obedient humble Servant,

CREWE.

ANNEXURE II.

Draft of Proposed Scheme of Women's Indian Medical Service, submitted to the Secretary of State for India by—

Mrs. Mary Scharlieb, M.D., 149, Harley Street, W.

Miss May Thorne, M.D., 148, Harley Street, W.

Miss Annette Benson, M.D., First Physician to the Cama (Civil) Hospital, Bombay.

Mrs. Emma Slater, Honorary Secretary to the United Kingdom Branch of the Association of Medical Women in India, 33, Chepstow Villas, W.

LONDON,
2nd November 1910.

PROPOSED SCHEME FOR THE FORMATION OF A WOMEN'S INDIAN MEDICAL SERVICE BY THE GOVERNMENT OF INDIA.

The object aimed at is the foundation of a sound system which will gain support and develop as circumstances lead the way.

It is not proposed that the Government shall launch out into new extensions of medical work on a large scale.

Probably the first step will be to organise the medical work which is now done by women and bring it under the proposed conditions.

I.—Preliminary.

The details of the scheme shall be worked out in India with regard to existing circumstances by those who possess knowledge of the existing services, and a Provisional Committee will naturally be formed for the purpose.

It is important that medical women, being those who are chiefly concerned, shall be well represented on this Committee, which will determine the conditions of the proposed Women's Indian Medical Service. One reason for this representation is to ensure a high standard of competence in the members of the Service.

II.—Organisation of Hospitals and Dispensaries for Women.

The ideal is the establishment of a hospital for women in every district, corresponding to the existing civil hospital.

Such hospitals shall be in charge of a medical woman of similar status and pay to the Civil Surgeon, and equally independent.

The financial footing shall be substantially the same as that of the existing civil hospital, *i.e.*, the funds found locally or aided by grants from the Local Government.

A system of rural hospitals and dispensaries shall be developed gradually by the Local Government as may be found desirable. It will grow if confidence is justified by the work done in the civil hospitals for women.

The country is not ripe for the appointment of isolated women in the districts, except under special conditions.

Where isolated subordinate women are appointed the medical officers (women) of the civil hospitals shall be their guardians.*

III.—Organisation of the proposed Women's Indian Medical Service.

There shall be a Superior and an Inferior Service.

The Superior Service shall consist of women civil surgeons in three or four grades, arranged on collateral lines with the Indian Medical Service.

The minimum pay shall be not less than Rs. 400 per mensem.

Nominees when selected shall act on probation as assistants for a period to be determined by the Provisional Committee. This will be in place of the regimental service required in the Indian Medical Service.

The Women's Indian Medical Service shall form a component part of the Medical Department under the Local Government.

For the Inspection of the women's work the office of Deputy Inspector-General shall be resuscitated in each Local Government and a woman appointed to fill it.

The mode of admission to the Service will require discussion. It is recommended that admission to the Superior Service shall be by selection and to the Inferior by examination.

Admission to the Superior Service by competitive examination is to be deprecated, as the unfit would not necessarily be eliminated.

Selection shall be made by a committee in India or by its commissary at Home, subject to such limitations as may be decided on by the Preliminary Committee. There shall be a good proportion of medical women on the Selection Committee.

A method of admission by selection similar to the one proposed is now used in the Public Works Department in India.

Admission to the Subordinate Service shall be by examination as in the corresponding service now existing and the cadre shall run on similar lines.

* Reference may be made to the methods of the Education Department, in which the Home conditions of the school mistresses are safeguarded.

ANNEXURE III.

Scheme for improving the prospects of Lady Doctors.

1. Accepting the figures given in the attached note by Mr. Buck, I put up a note showing the cost of a "Service" of 50 lady doctors of the 1st grade, and 60 assistant surgeons. These will suffice to staff the 43 major and 51 minor hospitals and to provide for a leave reserve.

2. With such a small service I do not think there is any object in "grading," and I suggest an incremental rate of pay. If we accept the view of the lady doctors that the minimum should be R400 per mensem, we might agree to an incremental rate of R400—20—600, the increments of R20 being annual ones.

The cost at this rate would be $50 \times 500^* \times 12 = \text{R}3,00,000$ per annum.

*Average rate of pay.

There should also be charge allowances for the different hospitals, which I estimate as follows :—

	R
$3 \times 150 \times 12$	= 5,400
$20 \times 100 \times 12$	= 24,000
$20 \times 50 \times 12$	= 12,000
TOTAL	41,400

3. To provide for their old age, the lady doctors should be required to contribute 5 per cent. of their salary to a Provident Fund, and the Association should guarantee to add a similar amount, the whole to be allowed 4 per cent. compound interest, and to be repayable on death or on quitting the service. Seeing that there are no pensions, I think that the Association must add an equivalent amount to that paid in by subscribers to the Provident Fund, as is done in the case of Railways, and they might protect themselves and secure continuity of service by making a rule that no lady doctor could claim the amount paid in by the Association until she had completed a certain number of years of service.

The cost of this proposal would be 5 per cent. of R3,00,000 = R15,000 per annum.

4. The lady doctors of the second class, or assistant surgeons, should receive the same pay as male Civil Assistant Surgeons, i.e., R100—50—300.

The financial footing shall be substantially the same as that of the existing civil hospital, *i.e.*, the funds found locally or aided by grants from the Local Government.

A system of rural hospitals and dispensaries shall be developed gradually by the Local Government as may be found desirable. It will grow if confidence is justified by the work done in the civil hospitals for women.

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The Women's Indian Medical Service shall form a component part of the Medical Department under the Local Government.

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2. With such a small service I do not think there is any object in "grading," and I suggest an incremental rate of pay. If we accept the view of the lady doctors that the minimum should be R400 per mensem, we might agree to an incremental rate of R400—20—600, the increments of R20 being annual ones.

The cost at this rate would be $50 \times 500^* \times 12 = \text{R}3,00,000$ per

*Average rate of pay. annum.

There should also be charge allowances for the different hospitals, which I estimate as follows :—

	R
$3 \times 150 \times 12$	= 5,400
$20 \times 100 \times 12$	= 24,000
$20 \times 50 \times 12$	= 12,000
Total	41,400

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The cost of this proposal would be 5 per cent. of R3,00,000 = R15,000 per annum.

4. The lady doctors of the second class, or assistant surgeons, should receive the same pay as male Civil Assistant Surgeons, i.e., R100—50—300.

The cost of this would be—

$20 \times 100 \times 12$	.	.	.	.	.	R = 24,000
$20 \times 150 \times 12$	.	.	.	.	.	= 36,000
$7 \times 200 \times 12$	.	.	.	.	.	= 40,800
$3 \times 300 \times 12$	.	.	.	.	.	= 10,800

Total

Total
+ 5 per cent. for Provident Fund

$$\begin{array}{r} 1,11,600 \\ \hline 5,600 \end{array} \left. \vphantom{\begin{array}{r} 1,11,600 \\ \hline 5,600 \end{array}} \right\} \text{Rs. } 1,17,200$$

5. The total cost of this scheme, per annum, would, therefore, be approximately as follows:—	<table border="0"> <tr> <td>Percent. for Provident Fund</td> <td>1,11,600</td> <td rowspan="2">}</td> <td rowspan="2">Rs. 1,17,200</td> </tr> <tr> <td></td> <td>5,600</td> </tr> <tr> <td></td> <td><u>1,17,200</u></td> <td></td> <td></td> </tr> </table>	Percent. for Provident Fund	1,11,600	}	Rs. 1,17,200		5,600		<u>1,17,200</u>		
Percent. for Provident Fund	1,11,600	}	Rs. 1,17,200								
	5,600										
	<u>1,17,200</u>										

Average pay of 50 lady employees = Rs. 1,11,600

Charge for Provident Fund = Rs. 5,600

Average pay of 50 lady doctors of 1st class	•	•	3,00,000
Charge allowance of 50 lady doctors of 1st class	•	•	41,400
Provident Fund contribution for ditto	•	•	1,5000
Average pay of 60 assistant surgeons	•	•	1,11,600
Provident Fund contribution for ditto	•	•	5,600
Total			<u>4,73,600</u>

or, in round figures, 5 lakhs.

or, in round figures, 5 lakhs.

26th April 192.

C. P. LUKIS.

THE COUNTESS OF DUFFERIN'S FUND,
CENTRAL COMMITTEE.

STATEMENT OF ACCOUNTS FOR THE YEAR 1911.

The Countess of Dufferin's Fund, Central Committee.

Progressive Account of the Central Committee of the Countess

RECEIPTS.	Ledger folio.	Amount.		
<i>Income of Fund—</i>		<i>R</i>	<i>a.</i>	<i>p.</i>
Subscriptions and Donations, Life Councillors	13	3,59,000	0	0
Ditto ditto Life Members	35	1,17,564	2	11
Ditto ditto Miscellaneous	34	2,54,553	14	6
Contributions from Branches	26	30,200	1	8
Collections in England	28	31,787	1	9
Sundry Receipts	109	1,382	1	6
Interest on Investments (except Trust Accounts)	124	6,95,189	12	2
		14,89,677	2	6
<i>United Kingdom Branch—</i>				
Passage-money allowances	226	598	12	6
<i>Trust Accounts—</i>				
Sir Dinshaw Maneckjee Petit	36	6,431	0	8
Sir John Muir	118	10,936	8	5
Henry Fawcett Prizes	125	9,039	11	3
Gilchrist Scholarships	318	—63	11	10
		26,343	8	6
TOTAL . . . . .	...	15,16,619	7	6

CALCUTTA;

The 1st March 1912.

of Dufferin's Fund up to the 31st December 1911.

EXPENDITURE	Ledger folio.	Amount.
		<i>Rs. a. p.</i>
<i>Investments—</i>		
4% Calcutta Municipal Debentures of 1904-05	352	8,021 4 0
4% Ditto ditto of 1903-04	171	68,331 14 15
Loan at 6% to Bengal Court of Wards, Shskarpura Estate	353	1,06,000 0 0
Loan at 6% Bhukailash Court of Wards Estate	353	3,00,000 0 0
Loan at 6% to Ghulam Rabbani Court of Wards Estate	363	55,000 0 0
		6,23,454 2 11
Nett charge on adjustment of former investments	290	28,298 8 3
		6,56,752 11 4
<i>Objects of Fund—</i>		
Scholarships	47	68,705 10 7
Grants-in-aid	140	19,767 8 2
Ditto, Bengal Branch	284	43,631 4 8
Ditto, United Provinces Branch	344	2,73,919 3 9
Ditto, Punjab Branch	268	80,469 7 7
Ditto, Assam Branch	347	20,647 4 2
Ditto, Central Provinces Branch	349	56,020 12 11
Ditto, Burma Branch	216	15,104 11 0
Ditto, Berar Branch	256	11,351 11 1
Ditto, Chota Nagpore Branch	228	1,000 0 0
Ditto, " "	212	2,790 0 0
Ditto, " "	251	11,398 13 3
Ditto, " "	228	610 0 0
Ditto, " "	282	41,167 1 11
Ditto, " "	293	6,000 0 0
Ditto, " "	286	5,100 0 0
Ditto, " "	273	434 11 4
Ditto, " "	241	547 5 4
Ditto, " "	324	1,300 0 0
Gratuities, including Books and Medals	147	2,281 13 3
English Lady Doctors under Central Committee	365	32,151 1 1
Travelling expenses of Lady Doctors in India	367	5,986 8 9
<i>United Kingdom Branch—</i>		
Salaries and travelling expenses of Lady Doctors in India	302	1,945 2 0
		7,16,854 3 6
<i>Expenses of Fund—</i>		
Advertisements and Printing	53	10,600 7 8
Telegrams	28	2,357 13 6
Postage and Receipt Stamps	121	3,893 2 7
Salaries and Wages and Gratifications	127	94,918 13 1
" " " "	351	6,547 9 11
" " " "	297	100 0 0
" " " "	170	9,137 1 2
" " " "	357	4,136 10 2
Office Printing	356	1,500 0 0
		1,33,541 10 1
<i>Cash Balance on 31st December 1911</i>		9,470 14 7
TOTAL		13,16,619 7 6

(Sd.) B. W. MARLOW, Colonel,
Honorary Treasurer.

Investment Account of Central Committee.

30

The Countess of Dufferin's Fund, Central Committee.

	Nominal Value.	Cost.
4% Calcutta Municipal Debentures. 1904-05	R a. p.	R a. p.
"	9,000 0 0	8,921 4 0
4% Ditto, 1903-04		
Loan at 6% per annum to Bengal Court of Wards, Shakarpura Estate	68,000 0 0	68,532 14 11
Loan at 6% per annum to Bhukailash Court of Wards Estate	1,96,000 0 0	1,96,000 0 0
Loan at 6% per annum to Gholam Rabbani Court of Wards Estate	3,00,000 0 0	3,00,000 0 0
TOTAL	55,000 0 0	55,000 0 0
	6,28,000 0 0	6,28,454 2 11

CALCUTTA;
The 1st March 1912.

(Sd.) B. W. MARLOW, Colonel,
Honorary Treasurer.

APPENDIX I.

Students studying in the Medical Colleges and Schools of Medicine in India.

Medical College, School or Hospital Class	University Course.	Assistant Surgeon or Medical Practitioner Class.	Hospital Assistant Class.	Midwifery, Nursing or Compounding classes, or attending lectures.
Allahabad	10
Agra	13
Bombay	31
Calcutta	9	20	66	47
Madras	18	6	21	45
Lahore	6	29	18	19
Patna	..	7	..	1
Burma	35
Hyderabad, Sind	3	3
Lucknow	15
Quilon	12
Bharatpur	2
Baroda	6
Mysore	1
Dacca	8	10
Ahmedabad	13
Hyderabad, Deccan	5
Cuttack	..	3	..	4
Benares	5	2
Patiala	20
Kotah	11
Nagpur	4
Delhi	3
Tonk	4
Surat	3
Amraoti	2
Ajmere	10
Trivandrum	8
Bhopal	16
Karachi	6
Canara	1
Gonda	2
Total	33	65	121	367

APPENDIX II.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association.

Name of Hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).		Approximate value of same.	HOW OBTAINED.	
			Built by Fund.	Presented and by whom (or otherwise).
Baluchistan.				
		R		
QUETTA	Lady Sandeman Zenana Dispensary.	9,620	By Municipality and Fund.	
SIBI	MacLvor Hospital	1,000	.....	Presented by Sirdar S. Singh, Contractor.
	Lady Doctor's quarters.	465	Provincial Revenues and Dispensary Fund.	
FORT SANDEMAN.	Zenana Hospital	6,027	Partly by Bazaar Fund.	An additional building presented by Mauladad Khan Nasir in 1910.
	TOTAL	17,112		
Bengal.				
		R		
BIRBHUM	Lady Curzon Zenana Hospital.	9,582	By subscriptions	The site was presented by Government.
	Mrs. Carstairs' cottage	2,190	Government	Purchased at a cost of Rs. 594-1-6. The land-lord gave the land free of rent.
DARBHANGA	Dufferin Hospital	33,000	.....	Darbhanga Raj.
BETTIAH	Ditto	84,284	.....	Bettiah Raj.
BEHAMPUR	Victoria Zenana Hospital	9,000	Built by subscriptions and donations.	
MONGHYR	Lady Mackenzie Zenana Hospital.	7,859	.....	Presented by Raja Kamalawari Prasad Singh of Monghyr.
BHAGALPUR	Rani Shibtarini Hospital	10,000	.....	Presented by Raja Shib Chunder Banerjee.
	Victoria Memorial	25,000	Raised by subscription from the public of Bhagalpur as a memorial to the late Queen Victoria.	
	Quarters for the Dhais and Compounder.	4,000	.....	Constructed by the Banali Raj Estate, Bhagalpur.
	Lady Doctor's quarters	2,000	Fund.	
KHULNA	Woodburn Hospital, Mrs. Collins' Zenana Cottage.	6,000	Built by donation	and Government grant.
CALCUTTA	Lady Dufferin Victoria Hospital.	6,84,389	Built by provincial branch with funds collected in Bengal.	
	The Surnomoyee Hostel	50,000	.....	Purchased by Maharani Surnomoyee as boarding house for female students.
	Lady Elliott Hostel	25,000	By special subscriptions.	

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).
Bengal— <i>contd.</i>			
	R		
BANKURA	Lady Dufferin Zenana Hospital.	8,274	Built by donations and subscriptions from zamindars, District Board and Bengal Branch of the Dufferin Fund.
			The land on which the Hospital stands with its compound was presented by Bengal Government.
GAYA	Lady Elgin Zenana Hospital and Dispensary.	64,813	Yes
	Lady Doctor's Residence.	10,000	... ..
	TOTAL	10,35,071	Presented by Raja Rameshwar Prasad Narain Singh of Maksudpur.
Berar.			
	R		
AMRAOTI	Female Hospital	34,084	By funds locally collected.
	TOTAL	34,084	
Bombay.			
	R		
AHMEDABAD	Victoria Jubilee Hospital for Women and Children, Jethibai Obstetric Wards, and Rewabai Obstetric Wards.	1,39,633	... ..
			The late Rao Bahadur Ranchorial Chhotatalal, C.I.E., spent Rs. 38,000; his son, the late Mr. Madhavlal, spent Rs. 3,000; and his grandson, Sardar Sir Chinubhai Madhavlal, Kt., C.I.E., spent the rest in making large extensions to the building.
HYDERABAD SIND.	Women's Hospital (including Dais' quarters, dead-house, out-houses and compound wall.)	27,154	Yes.
			The piece of ground on which the Hospital is built was presented to the Countess of Dufferin's Fund here by the Hyderabad Municipality.
SHOLAPUR	The Lady Reay Dufferin Hospital.	Not known	No.
	Raja Bahadur Narsingji Operation Theatre	Not known, work being incomplete.	Yes.
			Lent for use free of rent by the Sholapur Municipality.
			Built on Municipal ground close to the Hospital with a donation of Rs. 5,000 by Raja Bahadur Narsingji.

Statement showing value and particulars of buildings belonging to, or engaged in
furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom, (or otherwise).

Bombay—*contd.*

Sholapur— <i>contd.</i>	Quarters for the Lady Doctor with three out-houses for servants.	Not known, work being incomplete.	Yes.	Built on Government land granted at a nominal rental of Rs. 5 per annum, <i>vide</i> G. R. No. 3856 of 9th April 1911, Revenue Department.
	House No. $\frac{5000}{51}$ near Sadar Bazar Camp.	1,500	No.	Presented by Messrs. Cursetji & Sons and A. M. Dalal,
SHIKARPUR	Victoria Jubilee L. D. Hospital.	25,000	.....	Government.
	Bungalow for the residence of the Lady Doctor	9,972	By the Fund.	
SURAT	Sheth Morarbhaji Vijbhukhandas Hospital for Women and Children.	52,057	Grant of Rs. 1,386 by the Local Branch, Countess of Dufferin Fund.	Portion of legacy by Sheth Morarbhaji 'Vijbhukhandas' . 11,030 Gift from Bai Dayakore . 37,671 Gift from Surat Municipality . 2,000 TOTAL . 50,701
KARACHI	Lady Dufferin Hospital.	1,00,000	.....	Built and presented by E. Dinshaw, Esq., C.I.E.
	TOTAL	3,55,321		

Burma.
R

RANGOON	Dufferin Maternity Hospital.	1,19,538	Voluntary contributions and donations, grants from Local Government, Central Committee, and Rangoon and other Municipalities in Burma.	Site given by the Government of India.
	Quarters for nurses	31,968		
	Ditto	8,403		
	TOTAL	1,59,909		

Appendix II.—Value and particulars of buildings.

35

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund	Presented and by whom (or otherwise).

Central Provinces.

NAGPUR	Dufferin Hospital for Women.	R 50,041	Built with R14,323 from Provincial Branch, Rs. 5,000 from Central Committee and Rs. 8,822 from subscriptions.	Subscriptions of Rs. 13,000 were received from Sir Kastur Chand, K.I.C.E., Rs. 5,000 from the Nagpur Municipality, Rs. 2,000 from Rao Bahadur Appaji Buti towards Hospital Building Fund and Rs. 3,666 from Government.
	Zenana Ward	4,000	Built by Fund.	Subscription of Rs. 7,500 from Seth Bachraj of Wardha, and Rs. 500 from Manager, Empress Mills.
"	Quarters for the Resident Medical Officer and Matron.	9,663	Ditto.	
RAIPUR	Dufferin Wards in Municipal Hospital.	6,000	Built by Municipality.	
	Dufferin Ward in Municipal Hospital for the out-patients' block, Female Hospital Assistant's quarters and wall.	20,000	.....	Rajah Kamal Narayan Singh, Feudatory Chief, Khairagarh.
JUBBULPORE.	Lady Elgin Hospital including the new Hospital Assistant's Quarters.	20,070	.....
	Quarters for Hospital Assistant originally built in the Victoria Hospital compound	1,700	Built by Fund.	Raja Gokul Dass.
KHAIRAGARH.	Kamal Narain Dispensary	6,090	.....
	TOTAL	1,17,453	Built by State.	Built by Khairagarh State.

Eastern Bengal and Assam.

Dacca.	Dufferin Hospital.	R 18,769	Dufferin Memorial Fund.	
GAUHATI	Female Ward	3,520	.....
	Female Hospital Assistant's quarters.	900	.....	Built by Government, Municipality and Local Board.
GOALPARA	Lady Doctor's quarters	1,500	.....	Built by Local Board.
JORHAT	Lady Doctor's quarters.	1,000	.....	Presented by the Raj of Ejing.
COMILLA	Faizunnessa Hospital, Zenana	10,000	.....	Built by Local Board.
			.....	Built and presented by Nawab Shahba Faizunnessa of Lakshmi, Tippera.

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).

Eastern Bengal and Assam—*contd.*

		<i>R</i>		
MYMENSINGH	Bidyamayee Female Hospital.	5,253	.....	Built by late Bidyamayee Devi Chaudhurani of Muktagachha.
DINAJPUR	Female Hospital . .	14,000	.....	Built by local subscription.
RAJSHAHI	Lady Doctor's quarters .	2,500	.....	Built by Government.
PAENA	Hemangini Devi Female Hospital.	5,824	.....	Built by Babu Joges Praxanna Bhadhuri Zaminder.
BOGRA	Tahirunnessa Female Hospital.	8,000	.....	Built by Nawab Abdus Shohan Chaudhuri.
TOTAL		71,406		

Madras.

		<i>R</i>		
MADRAS	Victoria Hospital for Caste and Gosha Women.	1,00,000	.....	Presented by the Rajah of Venkatagiri, K.C.I.E.
MANGALORE	Women and Children's Hospital.	6,500	.....	Belongs to the Municipality.
CUDDALORE	Dispensary for Women and Children.	10,000	.....	Built by Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.
MATTANCHERRY (COCHIN).	Women and Children's Hospital.	20,000	.....	Built by the Cochin Government.
TRICHUR	Civil Hospital . .	4,000	.....	Ditto ditto.
NELLORE	Jubilee Hospital . .	22,000	Built by public subscriptions.	Presented by the Jubilee Committee.
VIZAGAPATAM	Victoria Hospital for Women and Children.	10,000	.....	Presented by Sri Maharaja Gajapathi Rao, C.I.E.
BOBBILI	Rajah of Bobbili's Hospital for Women.	5,000	.....	Presented by the late Hon'ble the Rajah of Bobbili, K.C.I.E.
SALEM	Queen Alexandra Hospital for Women and Children.	22,000	.....	Public subscriptions and Government grant.
VIZIANAGRAM	H. H. the Maharaja Kumarka of Rewa's Caste and Gosha Hospital.	50,000	H. H. the Maharaja Kumarka of Rewa.	Presented by Maharaja Kumarka of Rewa.
BELLARY	Victoria Memorial Women's Hospital.	10,000	V. M. Fund, raised by public subscriptions.	
TINNEVELLY	Dufferin Female Dispensary, Vannarpet.	25,000	District Board of Tinnevely.	R10,000 contributed by Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.
ADONI	V. M. Women's Dispensary.	14,000	V. M. Fund, raised by public subscriptions.	
CONJEEVERAM	Women and Children's Dispensary.	12,800	.....	Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.

Appendix 11.—Value and particulars of buildings.

37

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not)	Approximate value of same.	HOW OBTAINED	
		Built by Fund.	Presented and by whom (or otherwise).

Madras—*contd.*

	R		
CALICUT . Women and Children's Hospital.	40,000	..	
PUDUKOTTAI . Maharaja's Dispensary for Women and Children.	5,000		Partly by subscription, chief donor being Sir S. Ramaswamy Mudaliar, Kt, C.I.E., and partly by the Municipality and District Board.
COIMBATORE . Female Hospital	1,000		State buildings presented by H. H. the Maharaja of Pudukkottai
COCANADA . Lady Havelock Hospital	30,000	Purchased by the Municipality.	
TOTAL	3,87,300	By District Board, Godavari	
			Rs. 5,000 contributed by Mr. Venkatarathnam, Rao Bahadur

Mysore.

	R		
MYSORE . Her Highness the Maharani's Hospital.	22,622	..	
BANGALORE . Maternity Hospital	33,034	..	
KOLAR . Female Hospital and Dispensary.	5,500	Under construction at a cost of about Rs. 5,500	By Mysore Government and by contribution.
CHIKMAGALUR . Ditto	5,500	Ditto	Ditto.
HASSAN . Female Dispensary attached to General Hospital.	4,060	..	
MYSORE . Female Dispensary attached to City Hospital.	1,500	..	
BANGALORE . Female Hospital and Dispensary.	1,500	..	
SHIMOGA . Ditto	6,000	..	
TUMKUR . Ditto	5,248	Under construction.	
CHITALDROOG . Lady Curzon Hospital for Women and Children.	1,10,000	..	
BANGALORE . TOTAL	1,94,964	..	By Government of India and certain active gentlemen in the Government.

N.W. F. Provinces.

	R	
MALAKAND . Lady Minto Swat Hospital.	10,000	Local Fund.
TOTAL	10,000	

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).

Eastern Bengal and Assam—*contd.*

			₹		
MYMENSINGH	Bidyamayee Female Hospital.		5,253	.....	Built by late Bidyamayee Devi Chaudhurani of Muktagachha.
DINAJPUR	Female Hospital . .		14,000	.....	Built by local subscription.
RAJSHAHI	Lady Doctor's quarters .		2,500	.....	Built by Government.
PAUNA	Hemangini Devi Female Hospital.		5,894	.....	Built by Babu Joges Prasanna Bhadhuri Zaminder.
BOGRA	Tahirunnessa Female Hospital.		8,000	.....	Built by Nawab Abdus Shohan Chaudhuri.
	TOTAL		71,406		

Madras.

			₹		
MADRAS	Victoria Hospital for Caste and Gosha Women.		1,00,000	.....	Presented by the Rajah of Venkatagiri, K.C.I.E.
MANGALORE	Women and Children's Hospital.		6,500	.....	Belongs to the Municipality.
CUDDALORE	Dispensary for Women and Children.		10,000	.....	Built by Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.
MATTANCHERRY (COCHIN).	Women and Children's Hospital.		20,000	.....	Built by the Coch'n Government.
TRICHUR	Civil Hospital . .		4,000	.....	Ditto ditto.
NELLORE	Jubilee Hospital . .		22,000	Built by public subscriptions.	Presented by the Jubilee Committee.
VIZAGAPATAM	Victoria Hospital for Women and Children.		10,000	.....	Presented by Sri Maharaja Gajapathi Rao, C.I.E.
BOBBILI	Rajah of Bobbili's Hospital for Women.		5,000	.....	Presented by the late Hon'ble the Rajah of Bobbili, K.C.I.E.
SALEM	Queen Alexandra Hospital for Women and Children.		22,000	.....	Public subscriptions and Government grant.
VIZIANAGRAM	H. H. the Maharaja Kumarika of Rewa's Caste and Gosha Hospital.		50,000	H. H. the Maharaja Kumarika of Rewa.	Presented by Maharaja Kumarika of Rewa.
BELLARY	Victoria Memorial Women's Hospital.		10,000	V. M. Fund, raised by public subscriptions.	
TINNEVELLY	Dufferin Female Dispensary, Vannarpet.		25,000	District Board of Tinnevelly.	₹10,000 contributed by Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.
ADONI	V. M. Women's Dispensary.		14,000	V. M. Fund, raised by public subscriptions.	
CONJEEVERAM	Women and Children's Dispensary.		12,800	.....	Rajah Sir S. Ramaswamy Mudaliar, K.T., C.I.E.

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).

Madras--contd.

Mysore.

L'indice cambia
da 100 a 100,0
almeno a 100,0

الحمد لله الذي جعل القرآن الكريم
موسمًا من موسمي الدنيا والآخرة
موسمًا من موسمي العلم والفضل
موسمًا من موسمي النور والهدى

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).		Approximate value of same.	HOW OBTAINED.	
			Built by Fund.	Presented and by whom (or otherwise).
Punjab.				
		₹		
DELHI.	Victoria Zenana Hospital.	98,000	.....	By local subscriptions.
LAHORE	Lady Aitchison Hospital for Women.	80,000	.....	Assisted by the Punjab Branch, Countess of Dufferin, with a substantial monthly grant.
TOTAL		1,78,000		
United Provinces of Agra and Oudh.				
		₹		
AUGRA .	Lady Lyall Hospital .	1,27,003	Yes.	Old building dismantled and new one not yet been constructed.
	Maternity Hospital .	35,700	Yes.	
	Nurses' quarters .	...	.....
	Lady Doctor's quarters .	35,299	Yes.	} On rent paid by the Agra Municipality.
	Hostels for Female Students.	18,000	Yes.	
	Ferozabad Female Dispensary.	6,051	Ferozabad Municipality.	
	Pipalmandi Female Dispensary.	...	.....
	Tajganj Female Dispensary.	...	.....
ALIGARH .	Dufferin Hospital .	52,763	Yes.	R35,982 contributed by Rani Khushpal Kua Sahiba of Barauli District, Aligarh.
ALLAHABAD .	Dufferin Hospital .	71,542	.....	All paid by Provincial Government.
	Lady Doctor's quarters .	19,000	.....	Ditto.
BAHRAICH .	Dufferin Hospital .	5,000	.....	Lent by the Government of the United Provinces.
BARA BANKI.	Grigg Female Hospital	3,000	.....	Presented by Poor-House Committee and District Board.
	Lady Doctor's quarters .	3,000	.....	Built by late Rai Narain Bali Bahadur, Taluqdar of Daryabad.
	Maila Raiganj Ward .	1,900	.....	Presented by Shaikh Naushad Ali Khan, Taluqdar of Maila, Raiganj.
	Operating room .	1,345	Yes.	Built from Funds provided by Government.
	Pardah Nashin Ward and Choukidars' quarters	4,163	.....
BAREILLY .	Dufferin Hospital .	56,354	Built partly by Fund.	R13,430 being contributed by the District Board.
BENARES .	Ishwari Memorial Hospital.	1,58,374	.....	Built from subscriptions and Government grants.
BIJNOR .	Female Hospital .	11,525	Yes.	

Statement showing value and particulars of buildings belonging to, or engaged in furtherance of the objects of, the Association—*contd.*

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).
United Provinces of Agra and Oudh—contd.			
NAGINA	Female Hosp'tal . . .	5,385	Yes.
BUDAUN	Ditto . . .	11,153	Built partly by Fund
CANNPORE	Dufferin Hospital . . .	43,727	Yes.
	Maternity Ward . . .	7,584	.....
	Nurses' quarters . . .	4,410	.....
	Dais' quarters . . .	1,077	.....
	Female Compounders' quarters . . .	1,578	.....
FARUKHABAD	Two Servants' quarters . . .	1,644	Yes.
	Dufferin Hospital . . .	23,499	.....
	Operation room and equipment for same . . .	3,000	.....
	Dufferin Hospital . . .	5,000	Yes
FYZABAD	Dufferin Hospital . . .	11,980	.....
GONDA	Female Hospital . . .	3,751	Yes.
	May Barrow Hospital . . .	3,540	.....
GORAKHPUR	Quarters for Female Compounders, Khansarai and Sweepers . . .	1,031	.....
	Zenana Hospital . . .	27,665	.....
	Dufferin Hospital . . .	19,346	Built partly by Fund.
LUCKNOW	Ditto . . .	64,468	Yes.
	Quilton Memorial Wing . . .	15,163	.....
MEERUT	Dufferin Hospital . . .	15,593	Yes.
	Six Patients' Wards . . .	3,275	.....
MIRZAPUR	Jubilee Hospital . . .	15,826	.....
	Eye Ward, Hospital Assistants' and Compounders' quarters . . .	7,690	Built partly by Fund.
PARTABGARH	Dufferin Hospital . . .	25,263	.....
	Enclosed Wall . . .	3,712	.....
PILIBHIT	Dufferin Hospital . . .	14,215	Purchased by Fund.
RAN BARILL	Ditto . . .	8,063	Built partly by Fund.

A contribution being made by the Municipality.

By subscriptions specially collected for the purpose

Presented by Lala Bishambhar Nath.

By Victoria Memorial Fund.

By Government grant.

The compounders' quarters were made over to the Fund on the establishment of a Branch at Farukhabad.

Donation by Babu Bharat Ieda.

Built from Municipal contribution and local subscriptions.

Presented by Mrs. Pannel, of the late of Wight. By grant-in-aid from the Government.

Six wards being presented by private persons.

Presented by the Quilton Memorial Fund.

Presented by District Board.

Jubilee Hospital Fund, Mirzapur.

A contribution being made by the Provincial Branch.

Presented by Rani Raghuraj Koor of Partabgarh.

Built from a Government grant.

A contribution being made by the late Pan-
Sri Shankar Bahadur Singh, M.C.A.P. of Kila Jurgan.

**Statement showing value and particulars of buildings belonging to, or engaged in
furtherance of the objects of, the Association—*contd.***

Name of hospital, dispensary, ward, or building connected in any way with the work of the Association (whether the property of the Association or not).	Approximate value of same.	HOW OBTAINED.	
		Built by Fund.	Presented and by whom (or otherwise).

United Provinces of Agra and Oudh—*concl'd.*

<i>R</i>				
SAHARANPUR	Dufferin Hospital . .	16,145	Built partly by Fund.	Presented partly by Government who also made a contribution.
SHAHJAHANPUR.	Ditto . .	14,555	.....
SINGARI .	Female Hospital . .	10,000	.....	Presented by Lala Parmanand.
SITAPUR .	Dufferin Hospital . .	48,344	.....	Built from subscriptions.
	TOTAL .	10,50,225		

Native States.

<i>R</i>				
BETTIAH	Dufferin Hospital . .	50,000	.....	Bettiah Raj.
DARBHANGA .	Ditto . .	33,000	.....	Darbhangaj Raj.
SANGRUR, JHIND.	Victoria Female Hospital	20,000	.....	Jhind Durbar.
BHOPAL .	Lansdowne Hospital and Lady Minto Nursing School and Hostel for Girls.	53,392	.....	By the past and present Begums of Bhopal.
KAPURTHALA	Victoria Jubilee Hospital for Women.	9,588	.....	By H. H. the Maharaja of Kapurthala.
KOTAH .	Victoria Jubilee Hospital and Female Dispensary.	65,440	.....	By H. H. the Maharaja of Kotah.
OODEYPORE .	Walter Zenana Hospital	27,003	.....	By H. H. the Maharana of Oodeypore.
ULWAR .	Lady Dufferin Hospital	27,000	.....	} By H. H. the Maharaja of Ulwar.
	Lady Elgin Wards for Purdah-nashins.	11,191	.....
GWALIOR .	Memorial Hospital for Women and Children.	2,56,000	.....	By the State.
SRINAGAR .	Diamond Jubilee Zenana Hospital.	41,671	.....	Ditto.
REWAH .	Zenana Hospital and Quarters for Hospital Staff.	4,500	.....	Ditto.
PATIALA .	Lady Dufferin Hospital	50,000	.....	His Highness the late Maharaja.
	Hendley Female Dispensary.	5,241	.....	The late Council of Regency.
	Lady Curzon School for the training of nurses, etc.	24,280	.....	Ditto.
RAMPUR .	Zenana Hospital and Dispensary.	17,000	.....	By the State.
TONK .	Walter Female Hospital	19,500	.....	By H. H. the Nawab of Tonk.
BAHAWALPUR	Jubilee Female Hospital	50,000*	.....	By H. H. the Nawab of Bahawalpur.

* Under construction.

APPENDIX III.

Return of Patients treated in Hospitals for Women in India.

The following returns of patients treated are divided into three classes, *viz.* :—

Class A.—Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund.

„ B.—In Female Hospitals assisted by the Dufferin Fund.

„ C.—Native States (which now include the statistics returned by the Mysore Branch).

Baluchistan.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Quetta . .	Lady Dufferin Zenana Hospital . .	62	3,387	44	3,493
Ditto . .	K. B. Barjorjee Patel Ward . .	299	...	...	299
Sibi . .	Mclvor Female Dispensary . .	48	3,025	68	3,141
Fort Sandeman	Lady Dufferin Hospital . .	16	3,470	...	3,486
	TOTAL . .	425	9,882	112	10,419

Bengal.

Return of Patients treated in Female Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Calcutta . .	Lady Dufferin Victoria Hospital . .	1,114	7,294	...	8,408
Gaya . .	Lady Elgin Zenana Hospital . .	399	4,843	100	5,342
Bhagalpur . .	Rani Shibtarini and Victoria Memorial Hospital . .	304	5,787	167	6,258
	TOTAL . .	1,817	17,924	267	20,008

Bengal—*contd.*

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Ruthum .	Lady Curzon Zenana Hospital .	21	2,309	21	2,330
Dackrha .	Lady Dufferin Zenana Hospital .	15	2,45	54	2,509
Hazaribagh .	Do .	17	2,934	140	3,074
Khalsa .	Female Ward attached to the Woodburn Hospital.	116	2,790	52	2,858
Berhampore .	Victoria Zenana Hospital .	524	15,234	171	15,929
Cumtore .	Kamini Myre Dasi's Female Ward attached to North Suburban Hospital.	156	2,320	153	2,629
Monghyr .	Female Ward attached to Monghyr Hospital.	—	4,407	132	4,539
Nadia .	Rani Tara Sundari Female Ward attached to Naradwip Ganga Hospital.	8	116	40	164
Do .	Female Ward attached to Meherpur Hospital.	—	9	29	38
TOTAL .		977	36,298	817	38,122

Berar.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Amraoti . . .	The Amraoti Female Hospital	185	4,477	...	4,662
Ellichpur . . .	Female Ward of Charitable Dispensary.	...	3	29	32
Chandur Bazar . . .	Ditto	1	...	50	51
Daryapur . . .	Ditto	...	...	33	33
Anjangaon Surji . . .	Ditto	...	...	48	48
Mersi . . .	Ditto	...	...	45	45
Chandur Railway . . .	Ditto	1	...	56	57
Akola . . .	Ditto	...	...	77	77
Basein . . .	Ditto	...	...	76	76
Buldana . . .	Female Ward of Civil Hospital.	2	...	26	28
Khamgaon . . .	Female Ward of Charitable Dispensary.	...	...	40	40
Mehkar . . .	Ditto	1	...	25	26
Yeotmal . . .	Female Ward of the Civil Hospital.	...	...	42	42
Darwha . . .	Female Ward of the Charitable Dispensary.	1	...	30	31
Pusad . . .	Ditto	1	...	1	2
Malkapur (Buldana District). . .	Ditto	...	...	6	6
Jalgaon (Buldana District). . .	Ditto	9	...	44	53
Deulgaon Raja (Buldana District). . .	Ditto	...	...	15	15
	TOTAL	201	4,480	643	5,324

Bombay.

Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Hyderabad (Sind) . . .	Women's Hospital . . .	873	36,470	15	37,358
Shikarpur . . .	Lady Dufferin Hospital . . .	278	7,118	90	7,486
Satara . . .	Civil Hospital . . .	...	5	31	36
	TOTAL	1,151	43,593	126	44,880

Bombay—contd.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Sholapur	Lady Reay Dufferin Hospital	163	4,869	20	5,052
Surat	The Morarbai Vajbhukhandis Hospital and Dispensary	181	6,105	..	6,286
Karachi	Lady Dufferin Hospital	527	10,037	43	10,627
Do	Female Section, Jaffer Fuddoo Dispensary.	..	13,935	..	13,935
Ahmedabad	Victoria Jubilee Hospital for Women and Children.	1,810	12,013	132	13,957
Do.	Praja Hitārtha Dispensary.	..	5,418	..	5,418
Belgaum	Civil Hospital	..	972	12	984
Kaira	Do	..	..	6	6
Kapadwanj	Dispensary	..	8	37	45
Bhulia	Municipal Dispensary	..	4,074	28	5,002
Godhra	Panch Mahals and Rewa Kantha Branch	..	39	277	316
Poona City	K. H. Pestonji Sorabji Dispensary.	35	..	20	55
Do.	Not stated	..	88	..	88
TOTAL		2,715	58,500	575	61,791

Burma.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Rangoon	Lady Dufferin Maternity Hospital.	585	4,596	..	5,181
TOTAL		585	4,596	..	5,181

Central Provinces.

Return of Patients treated in Female Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Nagpur . . .	Dufferin Hospital . . .	661	11,131	120	11,912
Jubbulpur . . .	Lady Elgin Hospital . . .	312	6,767	623	7,702
	TOTAL . . .	973	17,898	743	19,614

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Saugor . . .	Main Dispensary . . .	96	2,676	95	2,867
	TOTAL . . .	96	2,676	95	2,867

Eastern Bengal and Assam.

Return of Patients treated in Female Hospitals which are mainly controlled and aided by the Dufferin Fund.

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Dacca . . .	Dufferin Hospital . . .	52	5,786	225	6,063
	TOTAL . . .	52	5,786	225	6,063

Appendix III.—Return of Patients treated.

Eastern Bengal and Assam—*contd.*

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

Female Hospitals assisted by the Dufferin Fund.					
CLASS B.					
STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			TOTAL.
		In.	Out.		
			Treated in hospital.	Treated at home.	
Comilla	Fairbairns Women's Hospital	10			
Gashati	Charitable Dispensary	75	5,991	139	6,131
Jorhat	Ditto	65	2,578	98	2,721
Sibsagar	Ditto		12,571	135	12,721
Samangasj	Ditto			25	26
Tezpur	Female Ward	77	1,089	129	2,318
Dibrui	Charitable Dispensary	53	2,631	45	2,744
Goolpara	Female Hospital	15	2,633	18	2,751
Barisal	Cox's Bazar Dispensary	152	1,473	82	1,458
Cox's Bazar	Female Hospital	24	7,313	11	7,347
Aijal	Apal Dispensary		1,653		1,653
Tawa	Tawa Hospital	2		16	18
Pabna	Hemangini Devi Female Hospital	102	5,075	24	5,123
TOTAL		573	46,235	772	4,804

Madras.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS 2.

PATIENTS TREATED BY THE DISTRICT FUND,					
CLASS 2.					
STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			TOTAL.
		In.	Out.	Total.	
		Treated in hospital.	Treated at home.		
	Royal Victoria Cottage and Convent Hospital.	2512	1120	-	2910
	TOTAL	2512	1120	-	2910

North-West Frontier Province.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Malakand . . .	Lady Minto Swat Hospital,	61	1,430	169	1,660
Peshawar . . .	Number III. Female Branch Dispensary.	...	14,386	35	14,421
Abbottabad . . .	Branch Dispensary of Civil Hospital.	283	2,080	7	2,370
Kohat City . . .	Female Hospital . . .	183	32,811	657	33,651
	TOTAL . . .	527	50,707	868	52,102

Punjab.

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund.

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Delhi . . .	Victoria Zenana Hospital.	259	6,260	...	6,519
Gujrat . . .	Female Out-door Department of Civil Hospital.	..	11,375	40	11,415
Lahore . . .	Lady Aitchison Hospital .	765	10,639	...	11,404
Simla . . .	Dufferin Ward, Ripon Hospital.	224	3,740	140	4,104
	TOTAL . . .	1,248	32,014	180	33,442

Appendix III.—Return of Patients treated.

United Provinces of Agra and Oudh.

Patients treated in Hospitals which are mainly controlled and aided by the Dufferin Fund,

CLASS A.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home	
Agra	Lady Lyall Hospital.				
Do.	Maternity Hospital.	1,081			
Do.	Lady Lyall Dispensary	564	"	"	1,081
Aligarh	Dufferin Hospital	"	10,574	"	564
Allahabad	Ditto	531	5,009	"	10,574
Bahraich.	Ditto	654	8,649	94	6,516
Bara Banki	Grigg Female Hospital	129	8,044	236	9,589
Bareilly	Dufferin Hospital	371	10,170	103	8,276
Penares	Ishwari Memorial Hospital	713	11,301	85	10,626
Bijnor	Mrs. Markham's Female Hospital	1,080	17,100	229	12,243
Do. (Nagina).	Female Hospital	107	5,697	400	13,880
Budaun	Ditto	70	4,291	66	5,870
Cawnpore	Dufferin Hospital	246	11,038	26	4,387
Farukhabad	Ditto	430	11,353	234	12,418
Fyzabad	Ditto	140	3,703	92	11,875
Gonda	Ditto	376	9,009	72	3,915
Do.	Mary Ward Barrow Purdah Female Hospital	165	6,529	204	9,589
Ghazipur	Zenana Hospital	25		84	6,778
Gorakhpur	Dufferin Hospital	355	5,792	"	25
Kheri	Ditto	405	6,808	62	6,209
Lucknow.	Ditto	153	4,648	150	7,263
Meerut	Ditto	980	9,909	48	4,851
Mirzapur.	Rani Raghuraj Dufferin Hospital.	373	11,284	281	12,170
Partabgarh	Ditto	230	6,820	300	11,897
Pilibhit	Ditto	145	4,464	120	7,180
Rae Bareilly	Ditto	200	5,511	45	4,654
Saharanpur	Ditto	140	4,025	56	5,767
Shahjahanpur	Ditto	215	7,139	116	4,281
Sitapur	Ditto	293	8,910	230	7,581
	TOTAL	317	6,200	245	9,448
		10,412	2,06,077	25	6,542
			3,663	2,20,152	

United Provinces of Agra and Oudh—*contd.*

Return of Patients treated in Female Hospitals assisted by the Dufferin Fund,

CLASS B.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.			
		In.	Out.		TOTAL.
			Treated in hospital.	Treated at home.	
Agra . .	Pipalimandi Dispensary . .	...	6,206	107	6,313
Do. . .	Tajganj Dispensary . .	...	4,473	20	4,493
Do. . .	Firozabad Dispensary . .	...	5,914	59	5,973
Azamgarh .	Female Hospital . .	144	5,981	77	6,202
Benares . .	Bheluput Hospital . .	...	8,439	43	8,482
Bulandshahr .	Mrs. LesliePorter's Hospital	365	4,323	55	4,743
Dehra Dun .	Female Hospital . .	82	6,111	435	6,628
Etawah . .	Ditto . .	111	5,086	12	5,209
Fatehput . .	Mrs. Rustanji's Dufferin Hospital.	150	2,328	34	2,512
Gonda . .	Ancon Memorial Hospital .	123	7,962	12	8,097
Hardoi . .	Female Dispensary . .	114	3,554	116	3,784
Do. (Sandila) .	Ditto . .	50	4,559	50	4,659
Hanurpur . .	Female Hospital . .	64	2,295	40	2,399
Manipuri . .	Female Dispensary . .	201	4,884	67	5,152
Moradabad . .	Victoria Hospital . .	489	11,748	72	12,309
Do. (Amrohi) .	Female Dispensary . .	78	8,501	56	8,635
Muttra . .	Female Hospital . .	97	6,887	41	7,025
Muzaffarnagar .	Ditto . .	209	4,528	30	4,767
Naini Tal . .	Crosthwaite Hospital . .	162	6,365	536	7,063
Orai . .	Female Hospital . .	62	4,431	40	4,533
Sultanpur . .	Amethi Hospital . .	104	3,804	64	3,972
TOTAL . .		2,605	1,18,379	1,966	1,22,950

Native States (which now include the statistics returned by the Mysore Branch).

CLASS C.

STATION.	NAME OF HOSPITAL.	PATIENTS TREATED IN 1911.				REMARKS.
		In.	Out.		TOTAL.	
			Treated in hospital.	Treated at home.		
Uttar	Lady Dufferin Hospital	314	13,004	519	13,867	
Oodeypur	Walter Hospital	82	2,712	122	2,916	
Kotah	Victoria Jubilee Hospital	220	8,288	60	8,588	
Bharatpur	Maji Sahiba Darya Kaur's Female Hospital.	355	8,198	515	9,068	
Elkaner	Main Dispensary, Bhugwandas Hospital, Jaswant Hospital	135	4,686	130	4,951	
Jodhpur	Zenana Wards, Mayo Hospital.	100	2,960		3,060	
Jeypur	Walter Female Hospital	719	13,303	120	14,147	
Tonk	Female Hospital	211	7,547	439	8,247	
Beawar	Scindia's Hospital for Women and Children.	4	1,732	14	1,750	
Gwalior	Zenana Hospital	1,135	21,105		23,240	
Renah	Jamnabai Hospital	25	5,468		5,493	
Baroda	Jubilee Wards	236	14,043		14,043	
Uttro	Zenana Hospital	78	3,833	64	3,975	
Kaparthala	Victoria Jubilee Hospital.	272	27,790	300	28,362	
Patiala	Lady Dufferin Hospital and City Branch.	40	11,430	983	12,821	
Jhind	Victoria Female Hospital, Sangrur.	174	4,510	59	4,618	
Bhopal	Lady Lansdowne Zenana Hospital.	306	5,379	2,000	7,493	
Bahawalpur	Jubilee Female Hospital	1,154	18,835	770	20,792	
Mattan, Cherry, Cochin	General Hospital (Female side).	...	18,766	30	18,816	Cochin State.
Erna-kulam, Cochin	Civil Hospital (Female side).	...	15,433	203	15,636	
Trichur, Cochin	Women and Children's Hospital.	2,327	9,645	...	11,972	
Trivandrum	Victoria Jubilee Hospital.	531	7,656	122	8,309	Travancore State.
Quilon	District Hospital (Female side).	...	1,121	...	1,121	
Alleppey	General Hospital (Female side).	265	8,218	64	9,147	
Trivassdrum	Carried over	9,772	2,45,443	7,056	2,62,271	

**Native States (which now include the statistics returned by the
Mysore Branch)—*contd.***

CLASS C—*contd.*

		PATIENTS TREATED IN 1911.				
STATION.	NAME OF HOSPITAL.	In.	Out.		TOTAL.	REMARKS.
			Treated in hospital.	Treated at home.		
	Brought forward	9,772	2,45,443	7,056	2,62,271	
Raikot	Rasulkhanji Hospital for Women and Children.	170	1,844	...	2,014	
Hyderabad (D)	Jalna Civil Dispensary	10	2,131	...	2,141	
Ditto	Chadderghat Civil Dispensary.	9	9,841	85	9,935	
Ditto	Suburban Civil Dispensary.	94	5,587	...	5,681	
Ditto	Gulburga Civil Dispensary.	...	675	...	675	
Ditto	Raichur Civil Dispensary	16	3,998	...	4,014	
Ditto	Dudhawli Dispensary	...	570	...	570	
Ditto	Aurungabad Civil Dispensary.	36	7,878	24	7,938	
Ditto	Hanam Konda Civil Dispensary.	8	2,070	101	2,179	
Ditto	Aliabad Dispensary	...	...	33	33	
Ditto	Victoria Zenana Hospital	2,076	12,511	...	14,587	
Jaora	Ditto	43	5,884	...	5,927	
Srinagar	Diamond Jubilee Zenana Hospital.	622	9,316	263	10,201	
Bettiah	Dufferin Hospital	420	8,313	12	8,745	
Darbhanga	Ditto	421	44,489	92	45,002	
Bangalore	Victoria Hospital, Female Department.	731	38,642	...	39,373	
Ditto	Maternity Hospital	762	15,197	29	15,988	
Ditto	Lady Curzon Hospital	1,982	14,509	...	16,551	
Mysore	General Hospital, Female Department.	...	7,641	...	7,641	
Ditto	H. H. The Maharani's Hospital.	698	10,573	75	11,346	
Kolar	Gold Fields Female Dispensary.	144	8,102	23	8,269	
Ditto	Female Dispensary	1	12,554	24	12,579	
Tumkur	Ditto	38	5,229	30	5,297	
Hassan	Ditto	8	15,554	30	15,592	
Shimoga	Ditto	...	12,541	250	12,791	
Kadur District, Chickmagalur.	Ditto	62	10,859	...	10,921	
Chitaldroog	Ditto	...	8,460	100	8,560	
TOTAL		18,123	5,20,471	8,227	5,46,821	

APPENDIX IV. ¹

Summaries of Reports of certain Branches and Native States.

The United Kingdom Branch.*

Miss Singha returned to India and is at present acting as Assistant to Dr. Bielby in private practice at Lahore.

Miss Patell, M.B., B.S., L.R.C.P., M.R.C.S., who has been in England four years, is now fully qualified. She was the first woman allowed to go up for the examination of the Royal College of Physicians, and the first to receive their degrees L.R.C.P. and M.R.C.S. She intends to remain two years longer in England to take the M.D. degree of London University. She means to specialize in tropical medicine and in diseases of women and children.

Miss Carleton, the daughter of an Indian civil servant, having passed her first professional examination for the degree of M.D. of the Edinburgh University was paid the sum of £50 according to agreement.

Miss Ghose is studying in Dublin for the fellowship of the Royal College of Surgeons there.

Miss Ricketts is taking the conjoint examination of the Royal College of Surgeons, and when successful will try for the M.L.M. of Ireland, at the Rotunda.

Miss Van Ingen, who has a scholarship from the Central Committee, is doing extremely well, and has taken the 2nd prize in Anatomy and Certificates of Honour in practical Physiology and Pharmacology. She will in due course go up for the 1st F.R.C.S.

HARRIOT DUFFERIN AND AVA.

Subscriptions.

	£	s.	d.		£	s.	d.
Mrs. Bell	0	10	0	Mr. S. Kingan	1	0	0
Mrs. Benson	1	0	0	Marquis of Lansdowne	1	0	0
Miss Bookey	1	0	0	Mrs. Lecky	1	1	0
Colonel Sir L. Bradford	1	0	0	Mrs. Loch	1	1	0
Lord Brassey	3	3	0	Sir Alfred and Lady Lyall	2	2	0
Lord Burnham	1	0	0	Sir J. B. Lyall	2	2	0
Sir T. Fowell Burton	5	0	0	Miss Macconchy	0	10	6
Mrs. Caldwell	1	0	0	Mrs. Percival Maxwell	2	0	0
General Sir Edward Chapman	0	10	6	Miss Monk	3	0	0
Stanley Cochrane, Esq.	2	0	0	Mrs. Mooshead	2	0	0
Colonel Harry Cooper	1	0	0	Colonel Parry Nesbit	1	0	0
Mrs. Corry	1	0	0	Sir Arthur Nicholson	2	2	0
Lady Emma Crichton	5	0	0	Lady D'Arcy Osborne	2	0	0
Mrs. Darley	1	0	0	Lady Plowden	0	10	0
Mrs. Hume Dudgeon	1	0	0	Mrs. Quin	1	0	0
Lady Grant Duff	3	3	0	Mrs. Quinn	1	0	0
Dowager Lady Dufferin and Ava.	5	0	0	Miss Ramsden	3	0	0
Miss Erck	0	10	0	Lady Reay	2	0	0
Mrs. Fowler	0	10	0	Mrs. Arthur Riall	1	0	0
Mrs. G. R. Hamilton (Dublin)	1	1	0	Duchess of Somerset	1	1	0
Mrs. Rowan Hamilton	1	0	0	Alice, Countess of Salford	1	1	0
Robert Hardie, Esq.	1	1	0	Mrs. Strickland	1	1	0
Sir P. Hutchins, and Lady	2	2	0	T. & M. W.	10	0	0
Misses L. and F. Jennings	1	1	0	Lady Wantage	10	0	0
W. B. Jones, Esq.	2	2	0				

Donations.

£93 4 0

Grant from Gilchrist Trustees

£150 0 0

* Report for 1910—that for 1911 not having been received.
denied.
to!

Statements of Accounts of the United Kingdom Branch of the Countess of Dufferin's Fund, from 1st January to 31st December 1910.

RECEIPTS.		EXPENDITURE.	
£	s. d.	£	s. d.
Balance at 1st January 1910—		Scholarships—Miss G. Carleton	50 0 0
On Deposit with Bankers 400 0 0		Miss Chize	50 0 0
Cash at Bankers, Current Account	414 4 8	Miss Van Ingen	24 0 0
	814 4 8	Miss R. Ricketts.	50 0 0
			174 0 0
Receipts—		Gilchrist Grant, remitted to Calcutta.	150 0 0
Subscriptions 25 per List	95 4 0	Expenses—	
Interest on Deposit with Bankers	5 17 7	Printing Reports.	1 13 4
Dividends on £1,574 Manchester Corporation 3 per cent. Stock	32 18 10	TOTAL	325 13 4
Grant from Gilchrist Trustees	150 0 0		
Central Committee for Miss Van Ingen's Scholarship	24 0 0	Balance at 31st December 1910—	
Refund of Income-tax on Dividends for year ending 5th April 1910	3 5 6	On Deposit with Bankers 400 0 0	
	334 5 11	Cash at Bankers, Current Account	417 12 9
TOTAL	1,148 10 7	Cash on Hand	5 4 6
			822 17 3
		TOTAL	1,148 10 7

THOMAS B. HENRY,
Chartered Accountant.

The 18th January 1911.

Sums received and expended from 1901-1910 by the United Kingdom Branch.

RECEIPTS.		EXPENDITURE.	
£	s. d.	£	s. d.
Subscriptions and Donations, and Interest on Deposits and Investments, and Grant of £150 from Gilchrist Trustees, for the past ten years—		Expenditure on objects of the Fund—	
1901	421 12 3	1901	383 7 0
1902	394 4 0	1902	339 12 2
1903	447 11 6	1903	284 5 0
1904	405 17 11	1904	394 10 6
1905	375 10 4	1905	439 2 6
1906	353 0 0	1906	876 4 2
1907	625 17 2	1907	519 17 3
1908	387 13 1	1908	312 6 8
1909	355 13 3	1909	256 14 6
1910	334 5 11	1910	325 13 4

Baluchistan Branch.

Quetta.—The report received from Miss E. M. Cardozo, L.R.C.P. & S., the lady doctor in charge of the Dufferin Hospital, is as follows:—"The total number of old and new out-patients treated during the year was 15,361, against 12,126 last year, an increase of 3,235.

There were 62 in-patients admitted, against 78 last year. This decrease was due to several long continued cases; of these one was the aunt of the Jam of Las Bela, who remained in one of the wards over 2½ months. The accommodation for in-patients is very limited, and several patients had to be refused admission in consequence.

The number of patients treated in their own homes was 36, and the number of visits paid to these was 433. 97 operations were performed, against 77, and 9 obstetrical cases were attended to, against 11 last year.

Sibi.—Miss A. Alfred, L.M.S., writes in regard to the McIvor Female Dispensary that:—"The total number of new patients treated during the year ending 30th November 1911 was 3,141, including 18 in-door, against 3,846, including 32 in-door, the decrease being due to the fact that (1) the Ziarat village visiting was not done this year; (2) I had to stay up at Ziarat a month longer; (3) I had to be away from the hospital over a week to attend a private out-station case.

One hundred and ninety-six cases of diseases peculiar to women were treated, including 39 midwifery cases, out of which 12 normal and one abnormal labour cases were treated at their homes by the *daïs* and me. Lately a number of cases had to be refused, owing to there being no trained *daïs* to attend them in their homes.

The hospital is as usual well attended by all classes of women, *purdah-matin* or otherwise, and especially by the local women, i.e., poor country Mohammedan women. As mentioned in my last year's report, an in-door patient's ward and a trained *daï* or nurse are much needed for this hospital. It is hoped that Mr. Dobbs, the Political Agent, and Dewan Ganpat Rai, Extra Assistant Commissioner of Sibi, who have done much to encourage and support this establishment, will kindly see this much needed requirement supplied in the coming year.

Besides the above mentioned officers, our gratitude is due to the Lady President, Mrs. Ramsey, and Lieutenant-Colonel Duke, the Honorary Secretary, and others, for the interest they have taken in this hospital."

Fort Sandeman.—Work here has been carried on under difficulties owing to changes in the staff. The following is an extract from the report submitted by the Political Agent in Zhob:—"During the year under report the dispensary remained closed from 23rd March to 31st July 1911, on account of the transfer of Miss A. M. Vane L.R.C.P. & S., the lady doctor.

It re-opened on 1st August 1911, and the Civil Sub-Assistant Surgeon, Cyril Cox, attended the hospital for one hour daily, except for the period from 1st November to 6th December 1911, when Miss K. O. Vaughan, M.S., was in charge.

The total number of patients treated during the 7½ months under review was 2,611, against 6,032 of the previous year, and the number of new patients is 1,660, against 2,277. The daily average attendance of out-door patients is 16½, while last year it was 21½. The number of in-door patients is 16, against 25 last year. One of the main reasons for 1,660 out-door patients, 694 were country people, and all the in-door patients with one exception were Pathans. 28 operations only were performed during the year and most of them were those peculiar to women.

There was no change in the staff up to March 1911, but during the remaining portion of the year it consisted of the following:—One Sub-Assistant Surgeon, Mr. Vane Servant; one Chaukidar; and one Sweeper. Miss K. O. Vaughan, M.S., was in charge for about three weeks during November and December 1911.

Miss Watts and her sister left Fort Sandeman on the 23rd March 1911, and the post of lady doctor was not filled till the arrival of Miss K. O. Vaughan, M.B., on the 14th November 1911. It was expected on the departure of Miss Watts that there would be some difficulty in replacing her, and it had been decided to apply for 2 female Sub-Assistant Surgeons. It appears that Miss Vaughan accepted the appointment under the misapprehension that Fort Sandeman was a large station, with a considerable resident, and floating population, whereas the fact is that Fort Sandeman is a small station, and that at two periods of the year only is there a large stream of Powindahs passing through, on their way south in the autumn and north in the spring, for whose benefit very largely this hospital exists. I desire to make this plain for the information of the Central Committee, as it would appear that the entire facts are not so well-known as they might be. Since Miss Vaughan left, on the 7th December 1911, negotiations have again been opened to secure the services of 2 ladies of the female Sub-Assistant Surgeon class, and it is hoped that these will very shortly be concluded."

Mysore Branch.

Mr. P. S. Achyuta Rao, Honorary Secretary of this branch, reports that "as many as 164,608 patients were treated during the year.

Of the pupils under training last year, *viz.*, Jegannadamma, Chenna Basamma and Ammannamma, the first and third were examined after they finished their course and were found qualified. The other one having undergone training for 8 months, obtained leave on the score of her ill-health, and is still on the sick list.

Emma Victoria has been taken on as pupil midwife during the year. This girl was first taken on as an unstipended pupil, and after 4 months' training was granted a scholarship of Rs. 8. She has finished her course, and passed the necessary examination in midwifery.

During the year under report, the services of Lieutenant-Colonel J. Smyth, M.D., I.M.S., having been placed at the disposal of the Government of India for 2 months. I was in charge of the duties of Honorary Secretary of both the Dufferin and the Victoria Memorial Scholarships Funds from 3rd January to 6th March 1911. Lieutenant-Colonel Smyth having finally reverted to British service in May 1911, and I having been on privilege leave, Dr. T. V. Armuga Mudaliar was in charge from 20th May to 16th June 1911 when he handed over charge to me."

North-West Frontier Province Branch.

The following reports have been forwarded by Lt.-Col. T. W. Irvine, I.M.S., the Chief Medical Officer, N. W. F. Province.—

Kohat.—Miss R. E. Veerana, S.A.S., writes as follows :—"The total number of out-patients treated in the Female Municipal Hospital, Kohat City, in 1911 was 33,468, of these 12,772 were new, and 657 were treated in their own homes.

A waiting room for the out-patients was added to the dispensary building during the year, which has greatly facilitated the lady doctor's work, as it prevents the crowding into the verandah of waiting patients.

All classes of women attend the dispensary, free of charge, except a very small number of strict purdah-nashins, who are visited in their own homes when in need of medical aid.

A main ward, which can accommodate 6 beds and 2 small wards, each capable of accommodating 2 patients, are used for the in-patients. 183 in-patients were admitted during the year. Of the 27 normal and abnormal cases of labour, 2 were treated in the hospital.

258 major and minor operations were performed, of these 26 major operations were

on in-patients done by the Civil Surgeon in the Civil Hospital, as there is no operating room in the female hospital.

The Dispensary is supported solely out of Municipal funds." *Malakand*.—Report by Miss I. Keess, L.M.S.,—"I took over charge of the Lady Minto Female Hospital, Swat, from 15th November 1911. Previous to my appointment the hospital was conducted by the Civil Surgeon and the Sub-Assistant Surgeon of the Civil Hospital. The staff consists of one compounder (male), one nurse and one female sweeper. There are four buildings enclosed by a purdah wall with a gate, occupied as follows—Four wards, each ward to hold 4 patients, Office and Dispensary, Medical Subordinate Quarters, and the Servants' quarters.

A pipe-water supply, with one tap, is in the compound. The hospital is situated at North Malakand, in an isolated place, far from the populous area of the valley, at a distance of 1½ miles from the main road.

The in-patients who have no means of support are provided with hospital diet and bedding, and the patients' male relations are allowed to live with them. From 15th November 1911 to 31st December 1911, there were 10 in-patients, and 155 were treated as out-patients.

The number of patients both in and out-door is increasing daily. The news of the appointment of a lady doctor has not yet become generally known, consequently the number of patients at present is small. The situation of the hospital cannot be regarded as that most likely to attract a large attendance.

The hospital is attended by Mussalman women belonging to the hill tribes, both purdah and non-purdah and is maintained by local funds, assisted by the Dufferin Fund. *Abbottabad*.—Report by Major V. G. Drake-Brockman, I.M.S., Civil Surgeon, Hazara District.—"The Female Branch of the Civil Dispensary, Abbottabad, is well patronized by the genuine purdah-nashin class, including the Sardar class.

The accommodation for in-patients is 8; the rooms are arranged on the family basis and the husbands are allowed to sleep in the hospital, as each room has a separate entry and courtyard. The total number of our-patients treated was 4,228, of these 7,037 were new. There were 31 in-patients admitted.

The number of patients treated in their own homes by the Female Sub-Assistant Surgeon and the Hospital Matron was 60. Ninety cases of diseases peculiar to women were treated, including 33 menstrual disorders. Of the latter, 30 were attended by the Hospital Matron at their homes. Fifty minor and 3 major operations were performed by the Female Sub-Assistant Surgeon during the year under report, and three obstetrical cases were conducted in hospital and in-patients' homes.

The female attendance increases day by day. The hospital is attended by all classes of Hindus and Mohammedans, by nashins or otherwise. The richer patients have to pay for their medical share of the people come from outlying stations for medical aid to the hospital. The poor are maintained by the Municipal Committee, Abbottabad.

There are no quarters for the female Sub-Assistant Surgeon and Hospital Matron in the hospital compound, and a great deal of inconvenience is caused when an urgent case comes to hospital.

The female dispensary is located in one of the hospital buildings with its own temporarily adapted, though it is unsuitable for the purpose. There is a proposal to erect a new hospital building and I hope that there will be suitable buildings erected for this purpose, though it may take a little time before the work is done. In the whole year."

NATIVE STATES.

Rajputana.

Reports are furnished on the following institutions :—

- I.—The Jaswant Hospital for Women, Jodhpur.
- II.—The Lady Dufferin Hospital, Alwar.
- III.—The Walter Zenana Hospital, Udaipur.
- IV.—The Victoria Jubilee Female Hospital, Kotah.
- V.—The Walter Female Hospital, Tonk.
- VI.—The Female Hospital, Bharatpur.
- VII.—The Mayo Hospital, Jaipur.
- VIII.—The Women's Hospital, Bikaner.
- IX.—The Female Dispensary, Beawar.

Jodhpur.—Miss J. Marsh, M.D., was in charge of the Jaswant Hospital for Women at Jodhpur till the 9th March 1911, when she resigned, and her place was filled by another Lady Superintendent, Miss Iles, M.D., on 1st April 1911. The latter also resigned, on 12th September 1911, since when the post of Lady Superintendent has been vacant, and Female Sub-Assistant Surgeon Miss Hennal Paul in temporary charge of the hospital.

There were 100 in and 2,960 out-door patients treated, against 196 in and 4,866 out-patients in the previous year, the decrease being due to the change of Superintendents.

There were 18 Major and 85 Minor operations performed, against 24 Major and 364 Minor operations in 1910.

Alwar.—Mrs. E. S. Gaudoin was in charge of the Dufferin Hospital at Alwar till April 1911, when she resigned, and was relieved by Female Sub-Assistant Surgeon Baiabai. No lady doctor has since been appointed, and the Sub-Assistant Surgeon is in sole charge. There were 314 in and 13,553 out-door patients treated, against 277 and 12,845, respectively, in the previous year. 429 purdah-nashin patients were treated in the hospital, as compared with 1,000 in 1910.

There were 52 Major and 724 Minor operations done, against 20 Major and 434 Minor operations in the previous year.

Udaipur.—Lady Doctor Miss McGlashan, M.B., Ch.B., was in charge of the Walter Zenana Hospital at Udaipur till the 28th February 1911, when she resigned, and since then no other lady doctor has been appointed. A female Sub-Assistant Surgeon is at present in charge. There were only 82 in-patients treated and 122 patients visited at their homes, as compared with 127 and 162, respectively, in the previous year. This decrease is partly due to the absence of a qualified lady doctor, which greatly limits the range of useful work that can be undertaken, and partly to the outbreak of plague in the city.

Kotah.—Miss J. Newton, L.R.C.P. & S., has been in charge of the Victoria Jubilee Hospital at Kotah throughout the year. There was an increase in the number of in-door patients treated and midwifery cases attended at the hospital and in their homes. An assistant lady doctor, Miss Gladys Pownes, was appointed to the hospital on 12th June 1911.

There were 17 Major and 331 Minor operations performed.

The female Sub-Assistant Surgeon is popular and liked by the women of Kotah.

Tonk.—The number of patients treated in the hospital during the year was, out-door 7,547, against 6,854 last year. In-door 211, against 254 the previous year, and 489 visits were paid to patients in their own homes.

Native States] Reports of certain Branches and Native States.

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The total number of operations performed in the hospital was 319, of which 61 were Major operations. The *dai* class has been continued throughout the year. There are four *dais* under training at present.

The hospital continues to be popular, the strict purdah rules observed enabling purdah ladies of all classes to attend freely for treatment.

Bharatpur.—Female Sub-Assistant Surgeon Bibi Rup Kaur has been in charge of the Female Hospital at Bharatpur throughout the year. 355 in and 8,198 out-patients were treated, as compared with 378 in and 7,981 out-door patients in 1910. There were 515 patients visited at their homes, against 511 in the previous year.

A separate Female Hospital building has been constructed, and was expected to be ready for occupation on the 1st December 1911.

Jaipur.—Miss L. E. Sykes, M.D., has been in charge of the female wards of the Mayo Hospital, Jaipur, throughout the year. There was a decrease in the number of in-door patients treated and of those visited at their homes.

The compounding, dressing and nursing in the female wards is now done entirely by females.

Bikaner.—Female Sub-Assistant Surgeon Elizabeth Moji Ram has been in charge of the female wards of the Bhagwan Dass Hospital at Bikaner throughout the year. There were 135 in and 4,816 out-patients treated, against 151 in and 5,009 out-door patients in the previous year.

There were 122 Major and 517 Minor operations performed, as compared with 117 Major and 716 Minor operations in 1910.

A new Female Hospital is in course of construction.

Beawar.—Female Sub-Assistant Surgeon Mrs J. Martin was in charge of the female ward of the Charitable Dispensary at Beawar for only 2 months and 2 days during the year, as she fell ill, and could not return to her work. From the 1st November 1911, Female Sub-Assistant Surgeon Pundita Sunder Lalji was engaged. During the short period of 3 months and 8 days which the female portion of the dispensary was open, 1,732 out and 4 in-patients were treated and 14 purdah-nashins were visited at their homes, 51 operations were done and two cases of difficult labour were treated.

Ajmer.—A female Sub-Assistant Surgeon has not been appointed as yet to the female wards of the Victoria Hospital at Ajmer for want of funds.

Hyderabad (Deccan).

The following brief reports have been kindly furnished by the Director of Public Health, the Nizam's Medical Department:—

Chadarghat.—The total number of new and old patients treated during the year 1911, Female Sub-Assistant Surgeon Pundita Sunder Lalji was engaged. During the short period of 3 months and 8 days which the female portion of the dispensary was open, 1,732 out and 4 in-patients were treated and 14 purdah-nashins were visited at their homes, 51 operations were done and two cases of difficult labour were treated.

Suburban.—The attendance of female patients at this dispensary during the year 1911 was as follows:—

Female Department out-patients, from 22nd May 1911 (date of opening of the Partridge) to 31st December 1911, 1,645; General Department from 1st January to 31st December 1911, 3,941. Total, 5,587. In-patients, from 1st January to 31st December 1911, 94. Grand Total, 5,681.

Dudhbaoli.—The total number of cases treated in this dispensary during the year 1911 was 570, out of which 160 were old patients, and 410 new. There was only one case in charge of the dispensary for nine months, and the present one for the last 3 months only, namely March, April and May.

Ralchur.—Mrs. G. W. Watts, the Assistant Surgeon attached to this hospital, was on sick leave from May 1910 to July 1911; and on her return was appointed to the Civil Dispensary, Hyderabad. Throughout the year 1911, no work was carried on in the zenana branch of this hospital, and the female patients were treated in the male department.

Hanamkondali.—The number of out-patients treated in the dispensary for the year, including new and old, is 2,171, and the in-patients 8. The reason for the in-patients being so few is that the female ward is small, and able to accommodate only one patient at a time, and it is situated close to the male ward for which reason some women object to occupy it; there is no separate ward for midwifery cases. The Gosha arrangements for out-patients are quite satisfactory, and many purdah women of good standing attend without the least objection.

Aurangabad.—During the year under report there were 36 patients admitted into the zenana wards, and 7,878 women and children were treated in the dispensary, while 24 patients were seen at home. For the greater part of the year (10 months) there was no lady doctor in charge of the female department and women and children were treated in the male branch of the out-patients' dispensary. 158 minor operations were done during the year. One case of difficult labour delivery by forceps extraction was conducted by the lady doctor at the patient's home, and fifteen cases of natural labour were also conducted outside by the midwife. No epidemics prevailed throughout the year. The commonest diseases coming for treatment were malarial fever, bronchitis, catarrhal ophthalmia, otorrhœa, diarrhœa, ascarides lumbricoides and skin affections.

Allabad.—Owing to the transfer of the lady doctor, and the brief stay of her successor, work in this dispensary was limited to two months, during which the patients treated, numbered only 33.

Travancore and Cochin.

Trivandrum Combined Maternity and Women and Children's Hospital.—There is an apparent fall in the number of patients treated in the out-patient department. This is due to the fact that the in-patients for the year under report were not entered in the out-patient register also, as was done in former years. The latter method has been discontinued. Obstetric work shows an increase of 93 cases over the number treated in 1910, the total number of cases attended in the past twelve months being 363, and the number the year before 270.

The number of Major operations performed was 297 (showing an increase of 43 operations over last year's number). This includes 114 Major obstetric operations. The Minor operations performed were 458.

The addition of three European Nursing Sisters to the hospital has proved a great boon. They work conscientiously and well, and have been of invaluable help in securing the comfort and care of patients.

Trivandrum, Female side, General Hospital.—64 cases of labour were attended in the houses of patients.

One hundred and twenty-eight Gynæcological cases were admitted as in-patients, and in 25 cases operations, such as Ovariectomy, Hysterectomy, Colporaphy, Dilatation, Curetting, etc., were performed successfully.

Quilon, Victoria Jubilee Hospital.—The number of patients treated during the year under report is 531 in the in-patient and 7,778 in the out-patient department, against 497 and 8,130 of last year, showing a decrease of 352 in the out-patient department. There has been an increase of 109 Maternity cases. 74 Maternity cases were treated in their own houses and 251 in the hospital.

There were 173 Major operations during the year, 59 of which were Obstetric.

A class of 12 pupil midwives was formed early in the year, 8 stipendiary and 4 private, and the training is proceeding.

Alleppey, District Hospital.—Lady Apothecary Miss John was on duty in this hospital for only three months and eight days during the year. In this time 11 out of 15 cases were attended to, with a daily attendance of 227, otherwise, three female assistant surgeons, 15 trained pupils who had been stipended last year continued to study in the cause of female aid. The construction of the proposed Maternity Hospital to be built at Trichur with the Edward Memorial Fund of Rs. 28,000 will be taken in hand this year.

Central India.

Bhopal.—The Superintendent of the Lady Lansdowne Hospital, Mrs. F. D. Barnes, M.D., accompanied Her Highness the Begum of Bhopal to Europe, and the hospital was left in the charge of Major Haig, Agency Surgeon, M.D., from April to October, under the supervision of Major Haig, Agency Surgeon in Bhopal. Miss Walker is reported to have done splendid work, and she has since been transferred to the Palace, where Her Highness has asked for her services. Her successor, Mrs. Hemisier, has taken up the duties, and is expected to prove a success. The Assistant Matron has been removed from her post, which is still vacant. The rest of the staff have worked satisfactorily. A severe epidemic of plague during August, September and October has considerably influenced this year's returns. The city was practically deserted, the people having fled to the district. A training school and twelve barracks have been erected as a hostel for students at a total cost of Rs. 10,637, including stables and a coach-house for a carriage provided for the hospital staff.

The Lady Superintendent acknowledges the valuable services rendered by Major Haig, M.D., the Agency Surgeon, especially during her absence in Europe, and Her Highness the Ruler continues to take the greatest interest in all matters connected with female medical aid.

Dwarior.—No report has been received from this State showing the work accomplished in 1911. But from the several tables of statistics sent in to us through the Administrative Medical Officer in Central India it appears that the patients treated during the year at the Joya-Arogya Hospital for women and children numbered 23,240, which includes 1,135 in-patients, while there were 188 Major and 652 Minor operations, and 78 maternity cases. The female staff of the hospital includes 3 assistant surgeons, 1 sub-assistant surgeon, 2 compounders, 3 midwives and 3 nurses. Attached to the Maharaja Tukaji Rao Hospital is a separate building, the Maharani Chandravati Female Hospital, under the charge of Miss Motilal Thasavala, L.M.S., with Mrs. Siddons (certificated) as her assistant. This department has 24 beds for women including a maternity ward of 12 beds, with lying-in and operating rooms. This building was opened in 1907. About 300 in-patient Gynaecologi-

cal cases are treated per annum; other diseases of women going into the family wards of the General Hospital. All female out-patients are similarly treated at the general out-patient room. From 61 to 80 confinements are treated in the lying-in ward.

The King Edward Hospital, Indore Residency, has 3 lying-in wards, and women's diseases are treated in the family wards of the institution. In this part of the country purdah is not so strict as in other parts.

Jaora.—Miss R. McVan held charge of the Victoria Zenana Hospital for the year under report, except from 20th June 1911 to 25th July 1911, when she was on privilege leave.

There were 3 Major operations, all Obstetric, and 149 Minor ones during the year.

Rewah.—The Zenana Hospital is in the immediate charge of Sub-Assistant Surgeon Janki Bai, assisted by a midwife trained at Indore under the auspices of the Victoria Memorial Scholarships Fund. The total number of patients treated in the hospital during the year was 5,493, inclusive of 25 in-patients.

Miscellaneous.

Baroda.—Miss E. Smith, L.M.S., has been in charge throughout the year. The out-door patients treated at the Jambabai Dispensary number 14,012, against 16,410 in the previous year.

In-door patients treated at the Dufferin Hospital 286, against 364 in the previous year. Major operations 236, Minor 415. Obstetric cases 12. The latter were cases for operation. There are two trained Indian nurses to attend Obstetric cases amongst the poor in their homes, people who, on account of caste prejudices and purdah, refuse to come to hospital.

The *dais* class was not examined in the year under report, the period of training having been extended, one year being considered insufficient.

Kapurthala.—The following report by Miss G. M. Friend-Pereira, M.D., on the work accomplished in connection with the Victoria Jubilee Hospital, Kapurthala, has been received through the Chief Minister to His Highness the Maharaja-i-Rajgan, and the Central Committee are much indebted to this gentleman for the trouble he has taken on the present occasion.

The number of patients treated in both departments, *i.e.*, in-door and out-door, rose from 25,619 last year to 28,362 during the year under report. There was also an increase of Major and Minor operations. The diseases treated in the hospital were for the most part Surgical and Gynæcological. A few maternity cases were admitted, all of which required operative treatment. The compounder and the *dai* are both qualified and experienced women, and have gained the confidence of the people, and as their fees are low, patients prefer to be treated in their own homes.

Few purdah-nashin women were admitted to the in-door department. There is no special accommodation for them, and purdah women object to share the wards with ordinary women, although men are strictly excluded.

The attendance of purdah women in the out-door department is very satisfactory, patients often coming in from out-stations and villages for treatment.

There was an increase of Major and Minor operations during the year. No alterations have been made in the building or staff. The hospital is in good repair. The Ranis continue to take an interest in the hospital, and to visit it. Presents of instruments and cooking utensils were given by them during the year, and His Highness the Maharaja presented the hospital with some linen, and has promised more.

Srinagar.—Miss H. Lauder, M.D., was in charge of the Diamond Jubilee Zenana Hospital throughout the year, and the Superintending Surgeon, Kashmir State Hospitals, in his covering letter observes that the record is one of progress, a great deal of valuable work having been done, and that the efforts of the Lady Superintendent well deserve commendation.

The number of patients treated during the year is 622 in-patients and 9,316 out-patients, against 531 and 8,771, respectively, in 1910. 263 patients were treated in their own homes during the year, 221 purdah ladies were treated as in-patients, and 2,497 in the out-patient department.

Sixty-eight maternity cases were treated in their own homes by the hospital staff during the year and 38 in the hospital, against 54 and 23, respectively, last year. There were 308 operations during the year, against 566 in 1910.

Miss Lauder returned from six months' leave on the 10th May, and took over charge from Miss Franklin, who had officiated during the Superintendent's absence and carried on the work of the hospital very successfully. The staff nurse, Miss Shepherd, had to resign, owing to ill-health. She has been replaced by Miss Stephens.

Rajkot.—The number of out-patients treated during the year under report was 1,844, against 1,775 of the previous year, and the number of in-patients 170, against 166 in 1910.

Miss E. A. Taylor resigned her post as House Surgeon during the year, and Miss A. Pinto was appointed in her place on 1st April 1911. No other changes in the medical staff of the Patiala State, is, as usual, interesting. He says that the female medical staff of the State has undergone numerous changes since last year. Miss Sohan Lal, House Surgeon of the Lady Dufferin Hospital, and Miss Pinto in charge of the Hendley Female Dispensary resigned at the end of the previous year. Their places were taken by Miss Fernandez, L.M.S., and Miss Masih, diplomaed Hospital Assistant. Miss Wheeler, the Matron of the Lady Curzon School for Dais, also resigned to get married, and her place was taken by Mrs. Highfield. Added to this, Miss M. J. Balfour, who has been working in the State for the last seven years, had to take leave on account of ill-health. The consequence was that Miss Jardine, who took Dr. Balfour's place, has had to work with a staff very largely composed of new hands. It is very creditable to her that the work has progressed so satisfactorily. There has been a falling-off in the number of patients at the Lady Dufferin Hospital, from 7,016 treated last year, to 6,938 this year, but there has been an increase of 933 at the Hendley Female Dispensary. A larger number of women have been treated at their own homes, which is satisfactory. The hospital also have training in the elements of nursing, such as bed making, taking temperatures, giving medicines, douches, applying dressings and bandaging. However, I agree with her that more could be done in the way of training, and this will have my careful attention during the coming year.

The matter will be enquired into and rectified. The Superintendent seems to be unaware of the fact that native nurses have already been trained at the Lady Curzon School and received certificates after examinations. The midwives also have training in the elements of nursing, such as bed making, taking temperatures, giving medicines, douches, applying dressings and bandaging. However, I agree with her that more could be done in the way of training, and this will have my careful attention during the coming year.

The work of the Lady Curzon School is satisfactory. Mrs. Highfield has a hard task before her in emulating the example of Miss Wheeler, who, besides being a good teacher, was also a disciplinarian of the right kind, sympathetic but firm. In conclusion, I may be permitted to mention that consumption seems to be on the increase in the Zenanas in Patiala, at any rate more cases are being reported than formerly. The matter is having the earnest and anxious consideration of His Highness the

Maharaja and the Patiala Durbar. This is a question which closely concerns the female medical staff of the State as it is the chief means by which this source can be attacked. I hope that we shall be able to report something definite in the way of progress in next year's report with regard to the prophylaxis of this disease."

The report of the officiating Superintendent, Miss N. R. Jardine, L.R.C.P. & S., runs:—"Miss Balfour, M.D., proceeded on six months' furlough on the 13th March, and has further obtained an extension of two months on medical certificate. I have been officiating since the 13th March. The rest of the staff remains the same.

Four hundred in-patients and 5,556 out-door were treated in the Lady Dufferin Hospital and 5,883 out-patients were treated in the Hendley Female Dispensary. The total number of new admissions in both institutions was 11,833.

Seven hundred and twenty-two visits were paid to patients at their homes by the Superintendent and officiating Superintendent. 400 operations were performed, of which 128 were Major.

Two hundred and sixty normal cases were conducted in the city by the *dais* trained in the Lady Curzon School. This number, however, is less than the actual number of cases attended, as some of the *dais* have grown careless about reporting their cases.

At the beginning of the year there were eleven pupil midwives in training in the Lady Curzon School. Six were examined by the Medical Adviser after a six months' training. All passed, and were granted certificates. The rest were not examined, as they had not attended the whole course. At present there are six pupils in receipt of scholarships, and all live in the quarters provided for them in the school.

So far, only *dais* have been trained in the school, which was opened for the training of both *dais* and nurses. The nursing of the hospital would be more efficiently performed if there were nurses to supervise the work of the *dais* and to take duties conjointly with them."

Bahawalpur.—The Medical Officer to the Bahawalpur State, in forwarding the annual report of Miss Z. E. DaCosta, L.R.C.P. & S., the lady doctor in charge of the Jubilee Female Hospital, states that the hospital is making steady progress, as shown by a rise in the number of patients, out-door and in-door, as well as in that of operations, Major and Minor.

As stated in the last year's report, the Council of Regency made a grant of Rs. 50,000 for the construction of a new building for the hospital. In February last His Honour the Lieutenant-Governor visited Bahawalpur, and Lady Dane graciously consented to lay the foundation stone of the hospital building, and further, permitted the association of her name with the new wards. This took place on the 13th of February 1911. The building is now almost complete, and will shortly be fit for occupation. The hospital remained under the charge of Miss Z. E. DaCosta, L.R.C.P. & S., who is conducting the work very ably and is popular among all classes of people. Miss Henry, senior compounder, resigned on account of ill-health and Miss Dyalchand has been appointed in her place, and is expected to join shortly.

Report of the Lady Doctor.—There has been a decided increase both in the number of out-door and in-door patients this year, the number of out-door patients exceeding those of last year by 911, and the in-door by 68.

The new hospital is a fine building, with well ventilated wards, verandahs on all sides and situated in a large open spot of ground. There are two separate maternity wards, also quarters for the staff.

The hospital will soon be completed, and will be greatly appreciated by the Mohammedan and Hindu patients. The house for the lady doctor is quite near the hospital, and will also be ready soon.

Out-door patients, new, 8,825; new and old, 25,176. In-door patients, new, 306; treated at home, 423.

Operations, Major, 196; Minor, 1,184; total, 1,380. Maternity cases, in hospital, 11; outside, 12.

Nahan.—The Zenana Hospital at Nahan is in the charge of Miss A. Singha, L.R.C.P., Edin. The attendance of both in-door and out-door patients has increased remarkably, in fact to nearly double the figures in 1910, the attendance of out-patients having averaged 44'89 daily, as compared with 26 in 1910, and in-patients 471, and of the operations 124 have been successful.

Jhind.—The increase in the numbers of both the out and in-door departments of the Victoria Female Hospital has been satisfactory, that of the former being 534, and of the latter 23.

The services of a qualified midwife have been engaged, and the city people it is stated already see the advantage of having the services of a trained woman at their disposal. There have been 34 confinements conducted at their homes, against 4 or 5 last year.

The Victoria Memorial Scholarships Fund

EXECUTIVE COMMITTEE.

Lady President:

HER EXCELLENCY THE LADY HARDINGE OF PENSHURST, C.B.

Members:

The Hon'ble SIR, S. H. BUTLER, K.C.S.I., C.I.E., I.C.S.

The Hon'ble SURGEON-GENERAL SIR C. P. LUKIS, K.C.S.I., M.D. F.R.C.S., I.M.S.

Lieut.-Colonel P. O'KINEALEY, I.M.S.

Honorary Treasurer:

COLONEL B. W. MARLOW, C.I.E.

Secretary:

E. J. HUGA, Esq.

Assistant Secretary:

W. G. A. HANRAHAN, Esq.

CENTRES ALREADY ESTABLISHED.

Honorary Secretaries.

Baluchistan—Agency Surgeon and A. M. O., Quetta.

Baroda—Chief Medical Officer.

Bengal—Inspector General of Civil Hospitals.

Berar—Honorary Secretary, Dufferin Fund, Amraoti.

Bhopal—Agency Surgeon.

Burma—Honorary Secretary, Dufferin Fund, Rangoon.

Central India—Agency Surgeon, Indore.

Central Provinces—Honorary Secretary, Dufferin Fund, Nagpur.

Hathwa—Manager, Hathwa Raj.

Hyderabad—Honorary Secretary, Dufferin Fund.

United Provinces—Inspector General of Civil Hospitals.

The Victoria Memorial Scholarships Fund.

Rules and Regulations.

1. The sums raised in furtherance of the above object shall constitute the Victoria Memorial Scholarships Fund, shall be kept separate from the present investment of the Countess of Dufferin's Fund proper, and interest accruing therefrom shall be exclusively used for the object for which Lady Curzon instituted the said Fund.

2. An Executive Committee shall be appointed by the Central Committee and charged with its direct management, and this Committee shall consist of—

- (1) the Lady President;
- (2) the Director-General, Indian Medical Service;
- (3) a member nominated by the Central Committee;
- (4) the Honorary Secretary, Central Committee, Countess of Dufferin's Fund.

3. For the local administration of the Fund there shall be formed a Local Committee in each centre of operations, consisting of—

- (a) the Civil Surgeon of the district,
- (b) the wife of a senior Civilian, and
- (c) a Secretary selected by the other two members.

The Local Committee shall in each instance be in direct communication with, and immediately responsible to, the local Inspector-General of Civil Hospitals or Administrative Medical Officer, who shall be guided by such instructions as the Executive Committee may think fit to issue.

4. The Executive Committee shall issue the necessary formal instructions to the Provincial and Local Branches, it being distinctly understood—

- (a) that the interest of the subscriptions shall be, as far as possible, expended in the districts whence they have been received, and
- (b) that in all cases the *dais* shall be instructed in hospitals, training schools and dispensaries lying nearest to the localities in which they will ultimately be engaged.

5. The said Fund may be utilized not only for the provision of scholarships, but also for the payment of teachers, provision of models, books and such incidental expenses as the Executive Committee may consider to fall within the objects of the Fund.

6. The Executive Committee may call for special reports from the Local Branches regarding their administration of the said Fund, and the results shall be shown in a separate section of the ordinary annual report issued by the National Association for Supplying Female Medical Aid to the Women of India.

The Victoria Memorial Scholarships Fund.

THE main objects of the Victoria Memorial Scholarships Fund, initiated by the late Lady Curzon in 1901-02 with the object of keeping in perpetual remembrance the sympathetic interest taken by the late Queen-Empress in the domestic troubles of the women of India, have already been duly explained in previous reports; and before giving a summary of the work accomplished in 1910, and in order that there may be as little misconception as possible about the scheme, the Committee thinks it advisable to again repeat what has already appeared in previous reports regarding the definite nature of the Fund.

The general object of improving the treatment of child-birth in India can be approached on two lines, which admit of being followed concurrently and which react on each other :—

- (1) to train up midwives of a superior class,
- (2) to endeavour to impart a certain amount of practical knowledge to the indigenous midwives (*dais*).

The former course, which is that followed in the main by the Dufferin Fund, presupposes a certain standard of education among the women who are trained. They must be able to read and write, and be capable of understanding lectures and studying simple text-books. It is, therefore, out of the question, until the number of educated women in India has very greatly increased, that the number of highly trained midwives should be anything but infinitesimally small in relation to the demand for their services. Such midwives, moreover, receive relatively large salaries and charge high fees; most of them belong to classes more or less out of touch with the customs and traditions of the people, and their sphere of action is limited by these considerations. Lady Curzon therefore decided that the proceeds of her appeal should be devoted to carrying out the second of the two courses mentioned above. This she believed to be an entirely new departure. It proceeds on the principle of making the best of actual facts and existing agencies, thus endeavouring gradually to improve them. The general idea is to get hold of as many as possible of the *indigenous hereditary midwives* and induce them to attend at Dufferin Hospitals, or at the female divisions of ordinary hospitals or dispensaries, for the purpose of acquiring such empirical knowledge as it is possible to impart to them. In comparison with the training of the regular midwife class, the amount of such knowledge will be very small; but the women themselves, or some of them, would start with a certain practical acquaintance with the subject and will probably learn

quickly. Even if at first only negative results are obtained, and the trained women merely abandon or discourage insanitary practices, the gain will be great. In time they will learn more, and whatever they learn will spread over a far wider area than can be reached by means of the superior class of midwives. The teaching will at first be oral, and will be conveyed in the colloquial language familiar to the pupils. And in order that this should be carried into effect, short and simple primers of midwifery practice in the various vernaculars have been prepared for the use of *dais*. In many of the classes reading and writing are being taught to enable the pupils to refer to these books. Much of the teaching will be committed to memory, and will tend to popularise the improved methods which will be taught to the *dais*.

In order to give effect to these principles, the objects of the Fund have now been defined to be—

- (1) To train midwives in the female wards of hospitals and female training schools in such a manner as will enable them to carry on their hereditary calling in harmony with the religious feelings of the people, and gradually to improve their traditional methods, in the light of modern sanitation and medical knowledge.
- (2) Scholarships to midwives will vary according to circumstances and locality.
- (3) When desirable, qualified female teachers, who understand the vernacular, will be sent to outlying districts, and fees will be paid to midwives who attend a course of elementary instruction.
- (4) Funds for the above purpose will be granted, as far as possible, according to the interest received on the sums raised in each locality.

As long ago as the fourth century, *A. D.*, India possessed in the *Susruta Samhita*, a treatise on midwifery which a well-known specialist describes as a "thoroughly rational system of medico-surgical teaching based upon accurate observation of nature." The same writer refers to the barbarous character of the modern treatment of child-birth in India, and observes :—"The degradation of the art of midwifery among the Indians to so low a stage must be ascribed in part to the caste prejudices of the people." The proposals sketched above are, in effect, a revival of the most ancient tradition and practice in India, and as such have received enthusiastic support from all patriotic Indians. Although the Fund was only started eight years ago the Committee is glad to report that its aims and objects are evidently warmly appreciated throughout the country by Indians of all classes.

As has been stated in report for previous years, considering the very short time that efforts have been made for the better training of the indigenous *dais*, the Committee has no reason to be discouraged at the limited success which has attended its efforts in certain parts of the country. The

difficulties with which it has to contend continue practically unchanged from year to year, and extraordinary superstitions, caste prejudices and ignorance have all to be overcome in carrying out the objects of the scheme.

The reports for the past seven or eight years have indeed all borne testimony to the extraordinary difficulties which exist with regard to the training of the hereditary *dais*, as well as that of the ordinary midwife.

The extracts from the district reports which are set forth below are published in the hope that the suggestions and difficulties which are alluded to therein may prove of value and assistance to some of those who are engaged in furthering the objects of the Fund.

It has to be remembered that only a very small percentage of Indian women are to-day able to read or write, and all the reports state that the general ignorance of the women who attend the classes in various parts of the country is the main stumbling-block which has to be overcome.

For instance the census of 1911 showed that only one female in 96 in India could read and write. Of the females aged 15 years and over, only 13 in a thousand were literate. According to the statistics of 1907 the total number of girls in schools of any kind was 862,441, and according to the customary modes of reckoning, this is 46 per cent of the girls of school age. As the Committee pointed out last year the resolution reviewing public instruction in the United Provinces for 1910 remarked that female education while not actually falling back is not advancing. The attitude of the people towards it varies too often from indifference to dislike. From these figures and facts it will be seen that the ignorance of the *dais* whom the local Committees endeavour to train is indeed great.

In some parts of India ladies of the highest family still prefer the methods of the hereditary *dai* to those of the qualified lady doctor, and the fear of losing their practice still prevents many of the ignorant *dais* from accepting scholarships, and from attending classes where they have opportunities of learning modern ideas. Some *dais* indeed consider themselves as more than proficient and regard any offer of teaching in the nature of an insult, while others oppose all European principles, and obstruct the lady doctors who would improve their knowledge in every possible way. Moreover, there is no doubt that cases do occur in which *dais* after having been paid to attend regular courses of instruction have subsequently reverted to their old practices, as they have found that their patients have disapproved of improved methods. One report states that the trained *dais* were unpopular because they washed their hands in soap and water instead of mud and water.

The actual period during which women should be retained in classes for study varies largely throughout the country. The Central Committee for various reasons has not deemed it wise to prescribe any uniform period of instruction, and provincial and local centres use their own discretion.

issuing rules on this subject. While some classes are held for three months others continue for three years.

The value of scholarships offered to women as inducements to attend classes also varies in a somewhat remarkable manner, and this question is also left to the discretion of local Committees.

In certain cases, moreover, where it is found impossible to attract the indigenous *dai* the Central Committee have consented to funds being expended on the training of a better class of women in the hope that her more ignorant sister may be tempted by the educated women's success to avail herself later on of the benefits which are held out to her. But wherever the indigenous *dai* can be induced to undergo a course of training the funds are invariably spent for her benefit.

The special elementary "Manual of Midwifery" for the use of midwives in receipt of scholarships from the Victoria Memorial Scholarships Fund, which was composed at Lady Curzon's desire by Lt.-Col. C. P. Lukis, M.B., I.M.S. (now Director-General of the Indian Medical Service), continues to be found of considerable service. The book which contains an introduction by Surgeon-General Sir B. Franklin, K.C.I.E., is published by Messrs. Thacker Spink & Co. Many hundreds of copies have been distributed to a large number of centres and schools of instruction, and arrangements have been made for its translation into the vernacular of the various districts engaged in the teaching of midwives. It has already been translated and published in Urdu, Hindi, Gujarati, Marathi and Bengali, while its translation into Tamil, Telugu, Malayalam and Burmese has been arranged by the provincial centres concerned. An illustrated edition in Kanarese at the expense of the Mysore Government, and another in Urdu by the State, has recently been issued. Applications for this manual in Urdu, Marathi, Bengali or Gujarati may be made to the Secretary, Calcutta.

The Victoria Memorial Scholarships

The Victoria Memorial Scholarships are a valuable means of providing for the education of the children of the Indian community in the various Districts and Native States where good work has been done. The Government of India is anxious to encourage the progress of the Indian community and to provide for the education of the children of the Indian community in the various Districts and Native States where good work has been done.

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Colonel Cornwallis and Surgeon-General Sir John Wood have been working for the progress of the Indian community and to provide for the education of the children of the Indian community in the various Districts and Native States where good work has been done. The Government of India is anxious to encourage the progress of the Indian community and to provide for the education of the children of the Indian community in the various Districts and Native States where good work has been done.

In the Gwalior State the work has been done under the guidance of the head of the hospital and there has been a great deal of good work done. In Hyderabad State matters are improving, and in Kashi reports that the record is one of progress and that a great deal of good work has been done.

The Central Committee therefore has reason to hope and patience the efforts of many earnest workers in the good work they gladly acknowledge here will be even more successful.

The following brief extracts from the reports which from the various Districts and Native States where Victoria Memorial Scholarships Fund have been ..

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The financial statement appended to this report shows the income and expenditure of the Fund for the year under review. The year opened with a credit balance of Rs 400-0-8, and closed with a credit balance of Rs 603-11-2.

The interest on investments during the year amounted to Rs 30,547.

The expenditure on grants-in-aid towards the objects of the Fund was Rs 7,925 and the working expenses were Rs 2,418.

As indicated above, the ignorance and illiteracy of many of the women is the great stumbling-block in the way of improvement. In Bengal four classes have been closed as pupils were not forthcoming although higher stipends were offered with promises of rewards if examinations were successfully passed. In Berar the *dais* are disappointed at not securing paid posts after undergoing training, and are of a particularly ignorant

class. At Lahore all attempts to secure hereditary *dais* have failed, and in several other directions results have not been very satisfactory.

At Rawalpindi difficulty is experienced in inducing *dais* after passing to bring their cases to the notice of the lady doctor.

On the other hand the Committee is glad to note several indications that useful work is being done, and that better results may be looked for in the future.

The Superintendent of the Cuttack School in Bengal says: "The demand for the services of passed *dais* under the local bodies is increasing and their work is appreciated in the families of educated people. It is reported in Saran that some of the passed *dais* are earning their livelihood by the practice of their profession in the neighbouring villages.

In all 283 *dais* have been trained in Bengal since the classes were started.

At Ambala in the Punjab it is stated that for the first time for many years no neglected case has come to hospital from the city, and this fact is attributed to the efforts of the *dais*.

Colonel Crawford, Civil Surgeon at Benares, writes: "There is no doubt that the movement is gaining the confidence of the public as there is a good demand for the services of *dais* who get certificates and no difficulty in obtaining pupils to replace those who pass out." At Agra ten indigenous *dais* are in the class and the Principal of the Medical College says: "I really think we are advancing and doing good work in getting the indigenous *dai* of the city thoroughly trained in antiseptic midwifery." At Bhopal where Her Highness the Begum has taken a keen interest in the scheme since its inception, it is said that the *dais* have almost invariably been able to persuade their patients to come into hospital where the *dais* have recognised that surgical interference has been necessary.

In the Gondal State the *dais* conducted 43 cases of labour under the guidance of the head *dai* of the hospital and those sent out are reported to be doing good work.

In Hyderabad State matters are improving, and in Kashmir the Resident reports that the record is one of progress and that a great deal of valuable work has been done.

The Central Committee therefore has reason to hope that with time and patience the efforts of many earnest workers in the districts whose good work they gladly acknowledge here will be eventually crowned with more success.

The following brief extracts from the reports which have been received from the various Districts and Native States where branches of the Victoria Memorial Scholarships Fund have been established, indicate

some of the difficulties which local committees have had to battle with, as well as the progress which has been achieved during the year 1911 :—

Baluchistan. Lieutenant-Colonel A. L. Duke, I.M.S., the Residency Surgeon and Chief Medical Officer in Baluchistan, forwards the annual reports on the Quetta and Sibi classes :—

Quetta.—Miss E. M. Cardozo, L.R.C.P. & S., writes :—" There are two *dais* training at present. One has passed in sick-nursing, in Ludhiana, but failed in midwifery. She has joined the training class here for midwifery for a year, and is giving satisfaction. The other *dai*, Momfita, is not at all satisfactory, but has done 1½ years' training. One *dai*, Ulfuth by name, completed her two years' course this March. She was examined by Dr. Glanville of the Zanana Mission Hospital, Quetta, and passed with credit in midwifery and sick-nursing. She has taken up an appointment in the Mission Male Hospital, and is also allowed to work in the bazaars amongst the zanana women. Since passing out, she attended one case of midwifery and a case of sick-nursing in the bazaar. Louisa, *dai* who qualified in 1909, has a very good private practice, and is popular amongst the Indian ladies in Quetta. She attended 14 cases of midwifery and 111 cases of sick-nursing during the year. The third qualified *dai*, Rebecca, is still on the Dufferin Hospital Staff, and works well."

Sibi.—Miss A. Alfred, L.M.S., reports as follows :—" The two *dais*, Halima and Sumri, who had joined the class in May 1909, completed their course in May 1911, and passed out creditably. Sumri *dai*, has been offered a post at Loralai at Rs 30 per mensem, which will be a great encouragement for other *dais* to come in for training. Dai Halima being of the indigenous class, has gone back to her village to work there.

I could not get any local women, indigenous *dais* or otherwise, to join the class this year. Two new pupils, who are not of *dai* caste, and also the hospital compounder have joined the class since last month. Four *dais* have passed out since the opening of the class here. Dai Hayatan is working in her village satisfactorily, and the *dai* who passed out with her was employed in the female ward of the Civil Hospital, Quetta.

Just when the public were beginning to know and appreciate the services of the two last passed out *dais*, they had to be sent away to work in their villages. Lately I have had to refuse a number of midwifery cases, as I had no *dais* to send out, except the new ones who could not be trusted to attend cases themselves. I trust the Committee will see its way to sanction a trained *dai* permanently for this Hospital, who would not only be of great help to the new *dais* in teaching them practical hospital and midwifery work, but would also be of use in the hospital too. The recommendation of the Committee to the authorities of the Local Districts and States, to stop the practice of the untrained indigenous *dais*, is a good one, and will induce these *dais* to come in to be trained. The *dais* trained by me were unpopular

for a time in their villages, as they washed their hands with soap and water and wore clean clothes, instead of washing with mud and water, and wearing dirty clothes."

The following notes are furnished by Colonel G. F. A. Harris, I.M.S., Bengal Inspector General of Civil Hospitals, Bengal:—"There were 11 classes in operation for the training of Indian midwives against 15 in the previous year, *vide* the statement attached. Four classes, *viz.*, those at Hughli, Berhampur, Puri and Hazaribagh, were closed as pupils were not forthcoming. It is to be regretted that the number of *dai* classes in Bengal is gradually decreasing, although efforts have been repeatedly made by the local officers to induce *daïs* to attend these classes by the offer of higher rates of stipend, in addition to promises of substantial rewards on passing the examination. Notwithstanding these inducements, it is difficult to get pupils. For the same reason, *viz.*, because pupils were not forthcoming, the classes at Burdwan, Nadia, Muzaffarpur, Monghyr, Champaran, Singhbhum and several other districts could not be re-opened during the year under report.

The classes at Birbhum, Cuttack, Saran and Darjeeling turned out between them more than half the total number of passed pupils and were the most successful classes of the year. The Superintendent of the Cuttack Medical School reports that the demand for the services of passed *daïs* under the local bodies is increasing, and that their work is appreciated in the families of the educated people. It is reported that in Saran some of the passed *daïs* are earning their livelihood by the practice of their profession in the neighbouring villages.

The total number of passed *daïs* during the year under report was 20, against 32 in the previous year, excluding *daïs* trained at the Calcutta Dufferin Hospital, where there are not separate Victoria Memorial Scholarship Fund *daïs*. Sixteen passed *daïs* were presented with certificates prescribed by the Executive Committee. Nine of them were rewarded with presents consisting of instruments and articles necessary for the practice of their profession. Two hundred and eighty-three *daïs* have in all been trained in Bengal since the formation of the Branch.

The total receipts of the *dai* classes for the year under report amount to Rs. 4,417-12-2, of which the sum of Rs. 1,686-14-0 was given from the Victoria Memorial Scholarships Fund at my disposal, Rs. 137-8-0 being for presents to passed *daïs* and the rest for stipends to pupils."

Lieutenant-Colonel E. A. W. Hall, I.M.S., the Superintendent of the Medical School, Dacca, writes:—"Work in this centre is still mainly confined to Dacca. The *dai* class attached to the Dacca Medical School was opened in the year 1902. The students were taught by the lady doctor of the Dufferin Hospital and the teacher of midwifery. Since the formation of the Branch 35 *daïs* successfully passed out after completion of one year's

E. B. and
Assam

study. Four *dai* students passed in the year under report, and at present there are 6 *dai* students in the class. Some candidates came from various districts to get admission into the *dai* class, but owing to the want of sufficient funds, we cannot admit more students than four, as there is no provision to meet the expenditure. This year, one Mahomedan candidate of Mymensing and another Hindu from Pabna were admitted to the *dai* class. At my request, the Chairman of the District Boards kindly sanctioned their stipends at Rs. 7 each per month, to enable them to prosecute their studies for one year. There is no Victoria Memorial Scholarships Fund in the Dacca district. The receipts for the *dai* class during the year under report were Rs. 228 received from Honorary Secretary, Countess of Dufferin's Fund, Provincial Committee, Eastern Bengal and Assam, and Rs. 240 from Dacca Municipality and District Boards."

From the brief particulars furnished by this centre, it appears that the pupils undergoing training are mostly Burmese, Karens and a few Eurasians. The Branch was opened in 1905, since which year some 35 women have been trained, including 13 during the year under report, leaving 11 still under training at the close of the year.

The circumstances of Burma differ considerably from those in India, and the necessity for limiting attention to the hereditary *dai* does not exist to the same extent, a fact which is recognised by the Executive Committee.

The following reports are forwarded by Lieutenant-Colonel H. E. Banatvala, I.M.S., Honorary Secretary of the Berar centre :—

Amraoti.—Miss L. Trewby, L.R.C.P. & S., writes :—"During the year under report three pupils have been trained. These have been examined by the Civil Surgeon, Colonel Banatvala and the lady doctor, and two have passed an examination. The other has been given a certificate of attendance, as her practical work is good, but her nervousness prevented her answering in the examination. All these pupils wish to practise midwifery, and intend to take it up as a profession. One of these is a Koshti from a distance, another is a Christian from Yeotmal, and the third, a very nice useful little woman, is I believe of the Maug caste. Out of 36 women who have been trained 24 are practising and two have died. In 1906 eight *dais* were trained, and to my certain and personal knowledge four of these are practising midwifery. The *dais* who join the class in this hospital come from all parts of Berar, and also from other parts. The pupils after training are very disappointed at not getting paid posts."

Akola.—As regards results at this station, Mr. M. D. Pillay, the local Honorary Secretary, reports :—"The *dai* class at Akola was closed for reasons—first, on account of the prevalence of plague at Akola and, secondly, because Mrs. Anna Purnabai Gokhle, the lady teacher, had to

resign owing to her husband's transfer. The managing committee advertised in the *Hindoo Prakash* of Bombay and attempted to engage a teacher in Mrs. Gokhle's place, but no suitable lady teacher could be found.

The students for the *dai* class being generally ignorant and illiterate, it is very hard to train them, and in several cases they do not practise according to the methods taught, but return to their own methods.

Under these circumstances, I suggested to the Civil Surgeon, Akola, that instead of wasting money, a lady sub-assistant surgeon, or an assistant surgeon, should be appointed on a reasonable salary, which would be a great boon to the public in general."

Mr. G. Sherlock-Hubbard, the Honorary Secretary of this centre, summarises the progress thus:—"During the year under report Jubbulpore was the only centre where a class for the training of indigenous *dais* was held. Central
Provinces.

Regarding the working of this class the lady doctor in charge of the Elgin Hospital, Jubbulpore, reports as follows:—

During the year the old class for illiterate hereditary *dais* has been abolished, and a class of better caste women entertained. The class consisted of 3 pupils, 2 of whom have just appeared for their examination, and passed successfully. The third girl, unfortunately, joined the class only a few months ago. They are taught, in addition to midwifery, how to dress surgical cases and sick-nursing so as to render them as efficient as possible.

The question of starting a class at the Dufferin Hospital, Nagpur, was under consideration during the year, but the proposal has been held in abeyance till the question of the diversion of the Victoria Memorial Scholarships Fund to other kindred objects is settled. On this subject an application is in course of submission to the Central Committee."

Ten midwifery pupils are now undergoing training, four at the ~~Government~~ ^{Central} Government Maternity Hospital and six at the Raja Sir Ramaswamy Modaliyar's Maternity Hospital. The training of native midwives was commenced in 1887, and since then 142 have passed out. Of these 99 are now employed by local bodies. No reliable information concerning the remainder is available, but no doubt some of them are performing useful work in the remote villages of the district.

No difficulty has been experienced in obtaining pupils for these classes, and in addition to those stipended by the Fund, a number of pupils are undergoing training at the expense of Local Boards. Those stipended by the Fund receive Rs 8 per mensem. During the year seven pupils have passed out successfully, and of these six have found employment under Local Boards.

The progress which continues to be made in the Punjab is shown by the following statement received from Colonel C. J. Bamber, M.C.S., the Inspector General of Civil Hospitals:—"During the year 1911-12, the

for the training of *dais*, under the auspices of the Victoria Memorial Scholarships Fund, were carried on at the following centres :—Delhi, Ambala, Simla, Ludhiana, Ferozepore, Lahore, Amritsar, and Rawalpindi.

Delhi.—At the first-named centre, four women underwent a partial course of training, but as the results obtained were unsatisfactory, it was considered a waste of money to continue the class, and it was abolished in January 1911.

Ambala.—Training was regularly continued at Ambala, and one *dai* has received a certificate. Dr. Carleton in her report on this class states that the greatest difficulty experienced has been in inducing the *dais* to attend at the women's hospital for practical training in simple nursing and cleanliness. This is a deplorable fact, as mere training in the *conduct* of labour cases is not sufficient, but should be coupled with instructions as to the *after-treatment* necessary for the well-being of mother and child. One thing, however, is worthy of mention, and this is that for the first time for years past, no neglected case has come to hospital from the city. This is, I think, a condition of which the lady doctor may well be proud, and goes far to prove that the training of *dais* at Ambala confers a distinct benefit on the female population of the city, who are dependent on these *dais* for medical aid.

Simla.—At the beginning of the year nine *dais* were under training at Simla. One left the class before the completion of her course, and another died. The remaining 7 have recently been examined by the civil surgeon, 5 of whom are sufficiently qualified to practise independently. The civil surgeon points out in his report that owing to these women living in various parts of the town it is often very difficult to get them all together when a case is available for demonstration, and he is of opinion that, if possible, the class should reside on the Ripon Hospital premises. In this I am inclined to agree, and shall take up the question later with a view to ascertaining whether arrangements cannot be made to give effect to the civil surgeon's suggestion.

Ludhiana.—Systematic training has gone on throughout the year at Ludhiana. In March last 9 *dais* appeared for the Lahore examination, 5 obtaining certificates. One of the 4 who failed continued her studies. During the year 3 *dais* were dismissed from the class, as they were not considered to possess sufficient reliability of character to justify their being recommended for employment when trained, and their places were taken by other women. Owing to lack of funds it was found impossible to carry on the training of indigenous *dais*, although 20 such have expressed a wish to undergo training. I hope, however, to shortly lay the matter before His Honour the Lieutenant-Governor, who is much interested in the subject of the training of *dais*, and there is reason to hope that a grant will be given from Provincial Funds towards the fur-

therance of this object at Lucknow. Arrangements for providing a grant towards supplying medical staff from the Government and certain articles of equipment to be used in the training of women graduates and the payment of a small fee for each case of attendance at the hospital which the lady doctor is called in under the Hospital Act. Arrangements will shortly be received.

Ferozepore.—Good work is also being done at Ferozepore. Two *dais* went up for the Lahore examination in March and last year. One of these is now working in connection with the *Lai* class at Lucknow and the other is employed as a dresser at the Mayo dispensary, and has herself now started a *dai* class of three members. This class is now run a fortnight by the lady doctor (Dr. Allen) who reports that the *Lai* has a great interest in her class and has done well.

Lahore.—At Lahore it was found impossible to get the indigenous *dais* to come and form a class so that only women visiting or passing *dais* were instructed.

Amritsar.—A class has also been under training at Amritsar but the results do not appear to be very satisfactory.

Rawalpindi.—Ten indigenous *dais* were trained at Rawalpindi. Two courses of twelve lectures each were given, the *dais* receiving reward for attendance and also on completion of each course. However, the civil surgeon is dissatisfied with results, as it appears that difficulty is experienced in inducing the *dais*, after they have been trained, to bring any of their cases to the notice of the lady doctor.

The advancement made in this centre is, as usual, most encouraging. The following notes are forwarded by the Hon'ble Colonel J. J. Lumsden, I.M.S., the Inspector General of Civil Hospitals:—

Cawnpore.—Report by Miss F. Leach, M.D., District Medical Officer. The Victoria Memorial training class was kept up as usual last year. In February Maini *dai* qualified, and was taken on the staff of the District Hospital along with Parbati *dai*, in place of two of the District Hospital nurses whose places fell vacant. Both these women, although attached on the hospital staff, are allowed to go out into the city and take cases of nursing and conducting normal labour cases when called for, but are not to practise independently in the city.

The two *dais* are now under training. One is very intelligent and reliable, and it is expected that on graduation she will return to Agra for practice. I have heard much of the many who, having undergone the training, will return to their homes, which these *dais* were originally intended.

The other woman is hard working and willing. She may in time turn out a good *dai*.

Benares.—Report by Lieutenant-Colonel J. M. Crawford, I.M.S., Civil Surgeon :—" There were 3 pupil *dais* under training at the commencement of the year. Of these one resigned on account of ill-health, one completed her course and passed her examination satisfactorily, and the third is still under training. There are also two more women under training who have been admitted to the class during the year to replace those who have left.

Another *dai* was also examined and passed her examination at the beginning of this year, as she completed her course of instruction just at the end of last year.

Since the formation of the branch 13 *dais* have been trained and given certificates. All of these, except one who is in bad health and unable to work, are earning their own livelihood as midwives.

During their two years' training the pupils get a very good practical experience, as there are about 150 maternity cases admitted to the Ishwari Hospital annually, more than half of which are abnormal cases. There is no doubt that the movement is gaining the confidence of the public as there is a good demand for the services of the *dais* who get certificates, and no difficulty in obtaining pupils to replace those who pass out on the completion of their course."

Lucknow.—Report by Lieutenant-Colonel W. Vost, I.M.S., Civil Surgeon :—" At the commencement of the year there were under training in the Lucknow Branch 7 *dais*, namely, Imtiazbi, Amna, Umradan, Norjohan, Bismillah, Kulsum and Sarfarazo.

On the 15th March 1911, Imtiazbi having completed her course of study passed a successful examination in midwifery and sick nursing, and in her place Khattan *dai* was engaged on the 16th of the same month. Kulsum was discharged for misconduct, and Nasiban replaced her.

During the year under report the Municipal Board has sanctioned the appointment of a fifth *dai* in the class, and Abadi was appointed *vice* Khanum who was dismissed. Amna *dai*, who completed her course of study on the 16th November last, passed a very creditable examination in midwifery and sick-nursing."

Report by Major H. Austin Smith, I.M.S., Principal of the Medical School :—" Of the 5 *dais* mentioned in the last year's report, the work of Mulia was found to be unsatisfactory, and she was therefore removed from the class. The remaining 4 *dais* were examined on 1st April 1911. Of these Kifayith and Hidayith passed a most satisfactory examination, and having attended over 20 midwifery cases they were granted their certificates. They have since got employment, one as a trained midwife under the President, Notified Area Rath, District Hamirpur, and the other in the Maternity Hospital here. Both the women were efficient in their work. The other two, *viz.*, Amirjan and Imaman, failed in the examination, and

were remanded for further training, but ultimately they were removed from the class as they did not improve.

At the request of the Provincial Committee of the Countess of Dufferin's Fund, United Provinces, the Government made a grant of Rs. 5,000 with the object of inducing the local *dais*, in consideration of the payment of a fee, to attend classes in which they could be taught methods of antiseptic midwifery. Of this the sum of Rs. 360 was allotted to this district. It is being spent in paying Rs. 2 a month extra to each of the 5 newly recruited indigenous *dais*, as they were not satisfied with the small allowance of Rs. 2 a month which they received from the Victoria Memorial Fund. Five indigenous *dais* are being trained in addition, and are paid Rs. 4 each a month from this allotment. Also rewards are given to those who do the best work and attend the most cases, and a pair of new scissors of good pattern has been supplied to each of these indigenous *dais*.

At first the real indigenous *dai* was not got hold of, but now we are securing her and all the ten women now in the class are indigenous *dais* working in the city of Agra. They attend one lecture on practical midwifery daily, given by Miss Wood, the lady superintendent, and she personally goes with them to their cases and gives practical demonstrations in procedure and antiseptics. I really think we are now advancing and doing good work in getting the indigenous *dai* of the city thoroughly trained in antiseptic midwifery.

Since March 1911, 305 midwifery cases were attended by the *dais* under training, each case under the supervision of Miss Wood, the lady superintendent of the class, notes of each case were kept and they all did well. In time I think there must be a demand for good trained *dais*, as the women of India learn the advantage of having trained women to attend them at their confinements. We also endeavour to get influential citizens to allow only the trained *dais* inside their houses. The work of the lady superintendent, Miss Wood, has been satisfactory in every way.

The expenditure incurred during the year was Rs. 1,877-14-0, and the Fund has a balance of Rs. 1,295-10-6."

Allahabad.—Report by Miss K. Bonnar, L.R.C.P. & S., Dufferin Hospital: "At the beginning of the current year 2 women, Mañi, Mahomedan, and Sahodra, Hindu, formed the class. Of these, Mañi passed her examination successfully, and is now practising in the city and doing well. The other, Sahodra, failed to pass, refused to reappear for the examination, and after a further period of 3 months' study left the class. These 2 women were replaced by Harbanskuar and Sural. They appear promising pupils, and I hope will do better than Sahodra. As a small beginning towards the training of local bazaar *dais*, I am glad to say that two women have voluntarily offered to attend the course."

witness cases without remuneration of any kind. I hope that in time others will follow suit, and soon we will be able to do something more in this respect towards furthering the objects for which the Victoria Memorial Class was started. I don't think it will be out of place for me to mention here that in the beginning of this year a sub-committee of the Municipal Board was formed, consisting of the Health Officer and two other members, both the latter being leading Indian practitioners, to consider and discuss methods to lessen the high rate of infant mortality. At the meeting which I was asked to attend it was decided to draw up certain resolutions to be represented to the full Board :—

(1) All *dais* should be registered. (2) No *dai* should be allowed to practise without a certificate of having witnessed a few cases or having undergone a short training. (3) Two trained *dais* should be entertained at the cost of the Municipal Board to attend the poor free of charge, and also to try and teach local *dais* at their houses elementary obstetric asepsis without interfering with the practice of said *dais*. I believe resolution No. 2 was thrown out for fear of complications, but unless some official recognition is taken of this matter, as in some Native States, our efforts will not be very successful.

Major P. B. Haig, I.M.S., Agency Surgeon, submits a report as follows from Mrs. F. D. Barnes, M.D., the lady doctor in charge of the Female Hospital :—“Of the thirty-one *dais* training in the class, twenty-four were successful in the final examination, and received diplomas permitting them to practise as qualified midwives in the city. These women, together with the women of previous class, conducted 1,654 confinement cases during the year ending 30th November 1911. Owing to a severe epidemic of plague in Bhopal during the months of August, September and October, the returns are not what we hoped them to be, as the city was practically deserted and the city *dais* have not yet come back.

The women, however, have thoroughly understood that they must work with us and under our control, and we have been called out to see many cases of difficult labour, and the *dais* have almost invariably been able to persuade their patients to come into hospital where the *dais* have recognised that surgical interference has been necessary. Owing to the epidemic and the desertion of the city, I have not yet formed the third class, but I hope to have one started very shortly, and I have asked Her Highness the Begum of Bhopal to communicate with the Tehsildars in the district in order to get in touch with the village *dais* for training. My scheme is to send one of the passed city women into the village to officiate for the permanent village *dai*, until she has received her year's training and diploma. This will require some working, but with Her Highness's help I hope to succeed in this very important branch of the Victoria Memorial Scholarship Fund work.

The *dais* receive daily tuition, and I have to thank Major Haig, I.M.S., Agency Surgeon in Bhopal, for having given up so much of his valuable time in the examination of the class."

The report of the Chief Medical Officer of the Gondal State runs : Gondal.
 —" At the beginning of December 1910 there were three female pupils under training ; of these three pupils, two passed their final examination and were sent out with certificates. The third one is still under training and she is in her third year. The progress of this third pupil is fairly satisfactory.

The *dais* trained and sent out from this centre are doing good service to the public. The *dais* under instructions during the year 1910-11, conducted 43 cases of labour under the guidance of the head *dai* of this hospital. The chief difficulty we experience is that of finding intelligent females to fill up vacancies."

The State authorities have omitted to furnish the usual report, and only Gwalior. send the tabular statement which is intended to accompany it. From the latter it will be seen that 65 *dais* have been trained in this centre since it was started in 1902 : that 15 of these were trained during the 12 months ended 30th November 1911, leaving 24 pupils still undergoing tuition at the close of the year. The average monthly cost of each pupil trained works out at slightly under Rs. 7. The centre has received in all some Rs. 33,000 from the funds of the Executive Committee, out of which it has still a balance in hand of over Rs. 6,500. Fourteen of the trained *dais* are employed in the district, and about 376 maternity cases were attended by them last year.

The officiating Residency Surgeon forwards a report by the Senior Hyderabad Visiting Surgeon, in which the progress in Hyderabad in the year under review is described as follows :—" At the beginning of December 1910 there were 5 *dais* under training, 26 were admitted during the year, making a total of 31. Of these, 4 went up to the examination and passed very creditably. They will now be granted diplomas.

In addition to this, 3 Eurasian nurses on the hospital staff were trained, one passed and 2 will shortly go up for examination. Four private pupils who had already passed in theory at the Sarfi Khas Regiment School have still to complete some months' practical training in this hospital before gaining their certificates.

Fourteen *dais* are still under training, leaving a surplus of 13 to be accounted for. Of these some were unequal to the theoretical work, others found the work too exacting, some were quarrelsome or dishonest, some left without any reason being assigned, while a large number were dissatisfied with the rate of pay, since our grant from the Victoria Memorial Scholarships Fund was reduced.

There has been a large increase in the number of patients, and to meet

the growing demands on the *dais'* service we have had to increase their number and give lower pay so as to keep up our pay-sheet within the limit sanctioned. This means that we can only get a class of women inferior mentally and morally for training, and even these are increasingly difficult to secure.

During the year the *dais* attended 260 cases. Two trained *dais* are retained as a private staff and are seldom left unemployed. They have given great satisfaction when sent to cases, and it is probable that the staff will be increased. We also keep in touch with some of the certificated *dais*, and are able to recommend them when our own staff is insufficient.

I may add that native women show a gratifying increase in confidence in the hospital and its staff, and 901 maternity cases were admitted during the year.

Of the 37 deaths which occurred amongst these patients, the women were, with very few exceptions, brought in in a dying state, or complications of a serious kind had been induced by the interference of unskilled women outside."

Indore.

Lieutenant-Colonel J. R. Roberts, I.M.S., Administrative Medical Officer in Central India, states very briefly that the class of 1910 of 20 students was examined in December 1910, and that of these all passed successfully, 17 in the first division and 3 in the second.

The present class which was opened in January 1911 was formed of 21 students, but the present strength is 18.

Baroda.

The Chief Medical Officer, Baroda State, says that "the class was started on 1st November 1910 and continued throughout the year. Nurse Gojrabai Mane gave lectures and demonstration to the *dai* candidates and taught them also practical work.

The Lady Doctor examined the candidates thrice in the year under report. The period of three years fixed for the training of the *dais* having expired, the annual examination was conducted by the Committee consisting of the Civil Medical Officer, Residency Surgeon and the Lady Doctor on 30th October 1911. Out of six candidates only two have passed.

The sum received during the year under review was Rs. 700, and with the balance of Rs. 1,467-3-3 left at the end of the previous year, the total comes to Rs. 2,167-3-3. Out of Rs. 2,167-3-3, Rs. 626-1-9 were spent towards the maintenance of the *dai* class, leaving a balance of Rs. 1,532-4-9 in the Government Treasury, and Rs. 8-12-9 in this office. The average monthly cost incurred on account of each *dai* was Rs. 8-11-1, against Rs. 9-8-5 in the previous year.

The above report also includes reports showing that no less than 155 lectures were given to *dais* from November 1910 to October 1911, and

that 53 labour cases were attended by the two successful candidates, of which 38 were personally conducted.

Mr. S. M. Fraser, C.I.E., the Resident in Kashmir, in forwarding the Kashmir.
following report states that the Superintending Surgeon, Kashmir State Hospital, in his covering letter observes that the record is one of progress, a great deal of valuable work having been done and that the efforts of the Lady Superintendent deserve commendation. The report of Miss A. Lauder, M.D., Superintendent, the Zenana Hospital, Srinagar, is to the effect that of the 5 *dais* under training last year, two left and have been replaced by 2 Hindu *dais*; these are good caste Pandit women whom hitherto we have not been able to persuade to come for training as they consider it *infra dig* to leave their homes to take up work of any kind; securing these women for training is a distinct advance in the right direction, and shews that the hospital is gaining the confidence of the class of the women for whom it is chiefly intended. One hundred and six maternity cases were treated during the year, 68 in their own homes and 38 in the hospital

Mr. C. H. A. Hill, C.I.B., I.C.S., the Agent to the Governor-General, Kathiawar.
Kathiawar, forwards the following particulars from Captain W. D. Keys, I.M.S., Agency Surgeon, Kathiawar:—"We were fortunate this year, though with difficulty, in securing a good probationer from 9th November 1911, who is still under training at the West Hospital, Rajkot, and Rasuikhanji Hospital for women.

As before, Miss Wickham has kindly taken the practical midwifery part of the training on her shoulders, thus providing adequate obstetrical teaching. Miss Eagan gives the necessary training in general nursing."

Mysore.—Mr. P. S. Achyuta Rao, the Honorary Secretary to this centre, sends a report which shows that there is a balance of Rs903-4-1 in hand.

Out of 5 pupils who have attended the class one has left, another is sick, and 3 are under training.

Mr. W. H. J. Wilkinson, I.C.S., First Assistant to the Agent to the Governor-General in Rajputana, forwards the following summary compiled by Lt.-Col. W. H. B. Robinson, I.M.S., the Residency Surgeon and Chief Medical Officer in Rajputana:— Rajputana.

Ajmer.—Mrs. M. Kane, lady superintendent, has been in charge of the Dai Training Class throughout the year. The 4 pupils who were mentioned in last year's report as being under instruction continued to work to the end of the session on the 30th April 1911, when they were examined by the Civil Surgeon; all of them passed and obtained their certificates and the usual honorarium given to successful candidates.

Seven pupils were admitted into the current year's class, of whom four came from Jaipur, 1 from Alwar and 1 from Ajmer in July and 1 from Banswara on 24th September, but the latter has been since discharged as

unlikely to prove efficient. The Hon'ble the Agent to the Governor-General in Rajputana was pleased to raise the scholarships of the pupils who come from the Native States from Rs. 5 to Rs. 15 per mensem each, so as to attract a better class of pupil; he also sanctioned a sum of Rs. 100 for furniture, fittings, teaching materials, etc., for the class.

During the year 21 in-door and 52 out-door maternity cases were treated and 98 persons sought advice and treatment for various other complaints chiefly amongst infants.

Since the inauguration of the class altogether forty-one pupils have passed; of these several are known to be working in the various dispensaries in Rajputana, others are privately practising midwifery and doing well; amongst the latter there are 7 at Ajmer, 3 at Kishengarh, 4 at Beawar, 1 at Nasirabad, 2 at Udaipur, 2 at Jodhpur, 2 at Shahpura and 3 at Sirohi. The remainder have been lost sight of.

As regards the funds of the Victoria Memorial Scholarships Fund, the opening balance to credit on the 30th November 1910 was Rs. 10,023-1-6, Receipts Rs. 3,742, Total Rs. 13,765-1-6, of which Rs. 2,498-1-4 was expended on the Ajmer Dai Class against Rs. 2,301-8-4 in the previous year. The closing balance in hand on the 30th November 1911 was Rs. 11,267-0-2.

Jaipur.—Two out of the four educated pupils of the new Dai Class opened in 1910, together with two female compounders from the Mayo Hospital, were sent to the Ajmer Class on the 9th July 1911 to qualify; the remaining two pupils are receiving their training in compounding, dressing, nursing as well as midwifery from Miss Sykes, M.D., Lady Doctor in charge of the female wards of the Mayo Hospital. They are paid by the Jaipur State.

Kotah.—Eleven pupils were admitted into the Dai Class at Kotah on the 4th July 1911; of these one left the class on the 15th August and 5 were discharged on the 15th September as incompetent; the remaining 5 passed their examination on the 15th November 1911; during the course of instruction each *dai* was paid Rs. 5 a month.

Alwar.—No Dai Class was started in the Lady Dufferin Hospital at Alwar during the year.

Tonk.—Dai Class report not received. Progress is slow, but it is hoped that the improved rates of scholarships now offered at the Ajmer Class to women who come for training from the Native States may prove attractive.

E. J. BUCK,
Joint Secretary.

THE VICTORIA MEMORIAL SCHOLARSHIPS FUND.

PROGRESS OF VARIOUS BRANCHES.

Victoria Memorial Scholarships Fund.

Progress of the various branches up to the 30th November 1911.

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.						RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1911.		Since formation of branch to 30th November 1911.		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Balance in hand on 30th November 1911.	Average monthly cost of each pupil during training.			
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.							
														7	8	
1	2	3	4	5	6	Bengal.								13		
Calcutta	Feb. 1903	1	21	5	...	R a. p. 660 0 0	R a. p. ...	R a. p. 10,487 0 0	R a. p. 645 4 2	R a. p. 1,416 7 7	R a. p. 710,620 9 0	R a. p. 511 11 2	...	R a. p. ...		
Burdwan	16th Oct. 1903.	...	27 1/4	...	...	...	...	...	490 0 0	...	7122 1 0	7367 15 0	...	...	No class formed during the year. The figures in columns 4, 8(b), 10 and 11 shown in the previous year's statement were wrong as now reported by the Civil Surgeon.
Birbhum, Suri	11th June 1907.	3	9	218 10 0	215 0 0	50 1 9	575 5 9	225 7 3	1 13 9	...		
Bankura	1st Oct. 1903.	2	10	2	96 0 0	200 5 6	97 4 0	947 3 10	7 0	4 0 10	...		

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Victoria Memorial Scholarships Fund.
Progress of the various branches.

Victoria Memorial Scholarships Fund.														
Progress of the various branches up to the 30th November 1911.														
Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.					RECEIPTS.				EXPENDITURE.			REMARKS.
		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Period of duration of each course.	During year ending 30th November 1911.		Since formation of branch to 30th Novem-ber 1911.	During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Balance in hand on 30th November 1911.	Average monthly cost of each pupil during training.			
					(a) From E. Committee.	(b) From other sources.								
												(a) From E. Committee.	(b) From other sources.	
1	2	3	4	5	6	7	8	9	10	11	12	13		
Calcutta	Feb. 1903	1	21	5	1	...	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.	R a. p.		
Burdwan	16th Oct. 1903.	...	...	...	...	...	600 0 0	10,487 0 0	645 4 2	1,416 7 7	10,620 9 0	511 11 2	
				...	...	...	...	...	490 0 0	...	...	...
Birbhum, Suri	11th June 1907.	3	9	...	...	...	218 10 0	215 0 0	585 13 0	50 1 9	575 5 9	225 7 3	1 13 9
Bankura	1st Oct. 1903.	2	10	...	...	...	96 0 0	200 5 6	753 14 4	97 4 0	947 3 10	7 0	4 0 10
Bengal.														
No class formed during the year. The figures in columns 4, 8(b), 10 and 11 shown in the previous year's statement were wrong as now reported by the Civil Surgeon.														

Branch	Date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526	527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547	548	549	550	551	552	553	554	555	556	557	558	559	560	561	562	563	564	565	566	567	568	569	570	571	572	573	574	575	576	577	578	579	580	581	582	583	584	585	586	587	588	589	590	591	592	593	594	595	596	597	598	599	600	601	602	603	604	605	606	607	608	609	610	611	612	613	614	615	616	617	618	619	620	621	622	623	624	625	626	627	628	629	630	631	632	633	634	635	636	637	638	639	640	641	642	643	644	645	646	647	648	649	650	651	652	653	654	655	656	657	658	659	660	661	662	663	664	665	666	667	668	669	670	671	672	673	674	675	676	677	678	679	680	681	682	683	684	685	686	687	688	689	690	691	692	693	694	695	696	697	698	699	700	701	702	703	704	705	706	707	708	709	710	711	712	713	714	715	716	717	718	719	720	721	722	723	724	725	726	727	728	729	730	731	732	733	734	735	736	737	738	739	740	741	742	743	744	745	746	747	748	749	750	751	752	753	754	755	756	757	758	759	760	761	762	763	764	765	766	767	768	769	770	771	772	773	774	775	776	777	778	779	780	781	782	783	784	785	786	787	788	789	790	791	792	793	794	795	796	797	798	799	800	801	802	803	804	805	806	807	808	809	810	811	812	813	814	815	816	817	818	819	820	821	822	823	824	825	826	827	828	829	830	831	832	833	834	835	836	837	838	839	840	841	842	843	844	845	846	847	848	849	850	851	852	853	854	855	856	857	858	859	860	861	862	863	864	865	866	867	868	869	870	871	872	873	874	875	876	877	878	879	880	881	882	883	884	885	886	887	888	889	890	891	892	893	894	895	896	897	898	899	900	901	902	903	904	905	906	907	908	909	910	911	912	913	914	915	916	917	918	919	920	921	922	923	924	925	926	927	928	929	930	931	932	933	934	935	936	937	938	939	940	941	942	943	944	945	946	947	948	949	950	951	952	953	954	955	956	957	958	959	960	961	962	963	964	965	966	967	968	969	970	971	972	973	974	975	976	977	978	979	980	981	982	983	984	985	986	987	988	989	990	991	992	993	994	995	996	997	998	999	1000	1001	1002	1003	1004	1005	1006	1007	1008	1009	1010	1011	1012	1013	1014	1015	1016	1017	1018	1019	1020	1021	1022	1023	1024	1025	1026	1027	1028	1029	1030	1031	1032	1033	1034	1035	1036	1037	1038	1039	1040	1041	1042	1043	1044	1045	1046	1047	1048	1049	1050	1051	1052	1053	1054	1055	1056	1057	1058	1059	1060	1061	1062	1063	1064	1065	1066	1067	1068	1069	1070	1071	1072	1073	1074	1075	1076	1077	1078	1079	1080	1081	1082	1083	1084	1085	1086	1087	1088	1089	1090	1091	1092	1093	1094	1095	1096	1097	1098	1099	1100	1101	1102	1103	1104	1105	1106	1107	1108	1109	1110	1111	1112	1113	1114	1115	1116	1117	1118	1119	1120	1121	1122	1123	1124	1125	1126	1127	1128	1129	1130	1131	1132	1133	1134	1135	1136	1137	1138	1139	1140	1141	1142	1143	1144	1145	1146	1147	1148	1149	1150	1151	1152	1153	1154	1155	1156	1157	1158	1159	1160	1161	1162	1163	1164	1165	1166	1167	1168	1169	1170	1171	1172	1173	1174	1175	1176	1177	1178	1179	1180	1181	1182	1183	1184	1185	1186	1187	1188	1189	1190	1191	1192	1193	1194	1195	1196	1197	1198	1199	1200	1201	1202	1203	1204	1205	1206	1207	1208	1209	1210	1211	1212	1213	1214	1215	1216	1217	1218	1219	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Progress of the various branches up to the 30th November 1911—*contd.*

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.						RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1911.		Since formation of branch to 30th November 1911.		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Balance in hand on 30th November 1911.	Average monthly cost of each pupil during training.			
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.							
I	2	3	4	5	6	7	8			9	10	11	12	13		
Bengal— <i>contd.</i>																
Bhagalpur	1st Dec. 1903.	...	8	...	...	R a. p. ...	R a. p. 300 0 0	R a. p. 596 0 0	R a. p. 666 3 6	R a. p. 229 12 6	R a. p. ...	R a. p. ...	No class formed.	
Putneah	1st Mar. 1908.	...	6	...	...	...	...	250 14 0	...	336 11 8	14 2 4	...	Do.	
Darjeeling	7th April 1909.	4	(b) 7	3	...	384 0 0	402 10 2	1,194 0 0	893 12 2	541 8 6	1,600 1 3	477 10 11	8 7 1	(b) The figures furnished by the Civil Surgeon in 1909-10 were inaccurate. Only 3 pupils passed during 1910 and 4 during the year under report.		
Cuttack	15th May 1906.	3	20	4	...	245 6 0	191 7 10	1,116 11 0	877 7 11	461 9 6	1,959 15 1	34 3 10	8 0 0	...		
Balasore	5th May 1903.	...	15	...	...	...	...	629 3 10	...	...	629 3 10	...	...	No class formed.
Puri	1st Jan. 1903.	...	19	96 0 0	282 6 0	...	378 6 0	Closed.		
Hazaribagh	19th June 1905.	...	5	641 4 7	680 13 10	3 6 9	...	Do.		

	1st April 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The Victoria Memorial Scholarships Fund.

Progress of the various branches up to the 30th November 1911—*contd.*

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.				RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1911.		Since formation of branch to 30th November 1911.		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Balance in hand on 30th November 1911.	Average monthly cost of each pupil during training.	
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.					
1	2	3	4	5	6	7	8		9	10	11	12	13	
Rangoon	31st Feb. 1905.	13	35	11	1 year sick-nursing and 1 year mid-wifery.	R a. p. 1,320 0 0	R a. p. 8,818 5 4 1,320 0 0	Burma. R a. p. 1,320 0 0 8,818 5 4 1,320 0 0	R a. p. 1,320 0 0	R a. p. 8,818 5 4 1,320 0 0	R a. p. ...	R a. p. ...	The girls undergoing training here are mostly Burmese, Karens and a few Eurasians; no native midwives attend. The training and classes, etc., do not therefore correspond to those held in India for the training of "dais."	
	Total	13	35	11	...	1,320 0 0	10,138 5 4	...	1,320 0 0	10,138 5 4	...	...
Jubbulpore	1st Dec. 1904.	2	10	1	18 months.	...	...	...	165 14 11	1,221 1 10	287 14 2	4 0 0 for day scholar and 6 0 0 for day and night scholar.	
	Total	2	10	1	...	...	1,500 0 0	...	165 14 11	1,221 1 10	287 14 2	...	

United Provinces.												
Alizabad	Sep. 1903	2	9	2 years	313 3 11	3,287 3 6	..	313 3 11	3,045 15 6	218 3 2	13 0 9	* Including Rs. 198-3-0 pay of the permanent dal on the staff of the Jhansi Memorial Hospital, Benares, at Rs. 15 per month.
Benares	1st Jan. 1903	2	13	2 years	431 7 11	3,717 7 1	..	433 7 11	3,717 7 6	..	about 9 0 0	
Cawnpore	Nov. 1902	5	18	2 years	141 0 0	3,037 14 5	..	141 0 0	2,957 14 5	..	10 0 0	Mam. Dhal passed out and remained under training till January 1911. Nandan Dhal remained under training from 1st February 1912 to 31st March 1911. Durg Dhal remained under training from 1st April 1912 till 31st August 1912. Kamran and Bhutan Mohan Devi Dhal were appointed to undergo training from 1st September 1911 and they are still under training.
Lucknow	20th Sep. 1903	2	5	2 years	475 0 0	2,717 0 1	1,055 14 9	1,089 10 5	5,193 14 10	..	12 3 11	
Agra	1st Nov. 1906	2	8	1 year	2,610 0 0	9,510 0 0	183 9 0	1,817 14 0	8,397 5 6	1,292 10 6	15 10 4	
	Total	13	55	25	3,073 11 10	21,289 9 6	1,340 7 9	3,555 4 3	21,592 9 9	1,513 13 8	..	
Punjab.												
Delhi	April 1907	..	..	2 months	80 0 0	1,346 3 0	..	80 0 0	1,346 3 0	..	3 0 0	The class was discontinued from 1st February 1911.
Ambala	May 1907	1	7	2 years	153 0 0	1,033 0 0	10 0 0	153 0 0	1,033 0 0	..	3 0 0	
Simla	1st Oct. 1907	8	65	..	301 0 0	5,453 0 0	..	746 12 0	5,166 8 0	286 8 0	6 0 0	

Progress of the various branches up to the 30th November 1911—*contd.*

Stations where classes are held.	Date of formation of branch	PUPILS TRAINED.					RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1911.		Since formation of branch to 30th November 1911.	During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Balance in hand on 30th November 1911.	Average monthly cost of each pupil during training.			
						(a) From E. Committee.	(b) From other sources.								
													(a) From E. Committee.	(b) From other sources.	
1	2	3	4	5	6	7	8	9	10	11	12	13			
Punjab—contd.															
Ludhiana	1906	5	42	24	2 years	R a. p. 1,157 12 0	K a. p. 7,285 13 3	R a. p. 885 0 0	R a. p. 1,157 12 0	R a. p. 8,170 13 7	R a. p. ...	R a. p. 7 0 0			
Ferozepore	Nov. 1903	7	12	10	9 months.	326 8 0	754 2 0	27 8 6	326 8 0	781 10 6	...	6 0 0			
Lanore	1st Jan. 1903.	3	17	1	2 years	576 11 5	6,482 6 8	...	576 11 5	6,482 6 8	...	7 4 0			
Amritsar	4th Feb. 1910.	6	14	5	9 to 11 months.	141 13 0	2,697 0 5	...	141 13 0	2,697 0 5	...	3 8 0			
Rawalpindi	1st Sep. 1907.	10	20	...	4 months.	202 8 0	805 1 0	...	202 8 0	805 1 0	...	5 0 0			
Total		40	177	44	...	3,429 4 5	25,846 10 4	922 8 6	3,385 0 5	26,482 11 2	286 8 0	...			
Baluchistan.															
Quetta	15th Feb. 1907.	1	3	2	2 years	1,688 0 0	8,428 0 0	...	1,470 0 0	7,587 0 0	840 0 0	61 4 7			
Sibi	1st Jan. 1907.	2	4	3	2 years	342 0 0	1,166 0 0	54 0 0	161 0 0	1,040 0 0	179 0 0	9 9 0			
Total		3	7	5	...	2,030 0 0	9,594 0 0	54 0 0	1,631 0 0	8,627 0 0	1,019 0 0	...			

Baroda	1st Nov. 1908.	2	47	6	3 years	700 0 0	7,216 0 0	616 1 9	5,684 24 6	3541 1 0	8 11 1
	Total	2	47	6		700 0 0	7,216 0 0	6 6 1 9	5,684 14 0	1,541 1 0	"
Bhopal	1st July 1909.	21	58		1 year	460 0 0	4,310 0 0	446 4 0	3,869 14 0	550 2 0	1 8 10
	Total	21	58			460 0 0	4,310 0 0	446 4 0	3,869 14 0	550 2 0	
Gondal	1st Jan. 1908.	2	7	1	3 years	275 0 0	2,310 0 0	280 14 9	2,310 2 11	33 13 1	7 13 0
	Total	2	7	1	"	275 0 0	2,310 0 0	280 14 9	2,310 2 11	35 13 1	
Lashtar and Ujjain.	1st April 1908.	18	65	24	3 years	3,500 0 0	33,300 0 0	2,461 1 8	30,839 11 10	6,527 4 2	6 14 1
	Total	18	65	24	"	3,500 0 0	33,300 0 0	2,461 1 8	30,839 11 10	6,527 4 2	

Position of the qual-
ified Data are employ-
ed in the District
Dispensary and
about 375 cases
(maternity) were
undertaken by them.

Progress of the various branches up to the 30th November 1911 — *concl'd.*

Stations where classes are held.	Date of formation of branch.	PUPILS TRAINED.					RECEIPTS.				EXPENDITURE.				REMARKS.
		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Others (not included in columns 3 and 4) still under training.	Period of duration of each course.	During year ending 30th November 1911.		Since formation of branch to 30th November 1911.		During year ending 30th November 1911.	From formation of branch to 30th November 1911.	Balance in hand on 30th November 1911.	Average monthly cost of each pupil during training.		
						(a) From E. Committee.	(b) From other sources.	(a) From E. Committee.	(b) From other sources.						
1	2	3	4	5	6	7	8	9	10	11	12	13			
Hyderabad (Deccan).															
Hyderabad (Deccan)	30th Dec. 1901.	4	157	14	..	R a. p. M. S. 315 15 2 115 10 11 Total	R a. p. M. S. 19,751 3 3	R a. p. M. S. 1,796 1 7	R a. p. M. S. 7 18,831 9 11	R a. p. M. S. 319 9 4	R a. p. M. S. 5 8 6		* Average is calculated on Rs. 1,966-1-7, the actual pay of 17 days during the year. Exclusive—Teacher's pay M. S. 240 0 0 Clerk's pay M. S. 360 0 0 600 0 0 1,196 1 7 † Total ex-1,796 1 7 penditure during the year.		
Central India.															
Indore	8th April 1902.	20	172	18	9 months.	1,450 0 0	1 0 0 14,800 0 0	1,753 5	7 14,214 8 0	587 14 0	8 8 2		Indore, Malwa District, Bhopawar, Bundelkhand and Baghelkhand Agencies.		
	TOTAL	20	172	18	..	1,450 0 0	1 0 0 14,800 0 0	1,753 5	7 14,214 8 0	587 14 0	..				

Rajkot	15th Jan 1901.	23	5	1 year	449 7 9	315 0 0	4,369 14 0	449 7 9	4,684 14 0	27d	7 7 7
	Total	25	5		449 7 9	315 0 0	4,369 14 0	449 7 9	4,684 14 0		
	1st June 1901.	2	1	1 year	9 12 11	RSJ 0 7	15 12 2	195 1 0	495 13 8	403 15 1	35 4 4
Mysore.	Total	1	2		9 12 11	RSJ 0 7	15 12 2	195 1 0	495 13 8	403 15 1	
	1st July 1901.	20	4	24 months	653 3 5		6,605 12 10	240 7 7	5,603 8 9	903 4 1	20 0 0
	Total	20	4		653 3 5		6,605 12 10	240 7 7	5,603 8 9	903 4 1	
Rajputana.	1st April 1901.	25	5	1 year	3,212 0 0	33,304 8 0	43,112 13 10	4,195 1 4	43,112 13 10	41,267 0 2	46 0 0
	Total	25	5		3,212 0 0	33,304 8 0	43,112 13 10	4,195 1 4	43,112 13 10	41,267 0 2	
	1st July 1901.	20	4	24 months	653 3 5		6,605 12 10	240 7 7	5,603 8 9	903 4 1	
Mysore.	Total	20	4		653 3 5		6,605 12 10	240 7 7	5,603 8 9	903 4 1	
	1st July 1901.	20	4	24 months	653 3 5		6,605 12 10	240 7 7	5,603 8 9	903 4 1	
	Total	20	4		653 3 5		6,605 12 10	240 7 7	5,603 8 9	903 4 1	

Memorial Scholarships Fund during the year 1911.

PAYMENTS.	Details.	TOTAL.
	R a. p.	R a. p.
<i>Objects of Fund—</i>		
Grants-in-aid—		
Baluchistan	2,030 0 0	
Baroda	700 0 0	
Bengal	1,892 0 0	
Berat	925 0 0	
Bhopal	460 0 0	
Burma	1,320 0 0	
Central Provinces	781 0 0	
Gondal	275 0 0	
Gwalior	3,500 0 0	
Hathwa	1,500 0 0	
Hyderabad	1,717 0 0	
Indore	1,450 0 0	
Junagadh	192 0 0	
Mysore	600 0 0	
Punjab	3,407 0 0	
Rajputana	3,742 0 0	
United Provinces	3,434 0 0	
Miscellaneous	"	
		27,925 0 0
<i>Expenses of Fund—</i>		
Salaries of Office Establishment	1,785 0 0	
Office Contingencies, including postage, telegrams, etc.	411 7 4	
Commission on investments, realizing interest, etc.	222 6 2	
		2,418 13 6
	TOTAL	30,343 13 6
Closing balance on 31st December 1910	"	603 11 2
	TOTAL	30,947 2 8

(Sd.) B. W. MARLOW, Colonel,
Honorary Treasurer.

Progressive Account of the Victoria Memorial

RECEIPTS.	Ledger Folio.	Amount.
		<i>R a. p</i>
<i>Income of Fund—</i>		
Subscriptions	3	6,91,011 1 11
Interest on Investments	8	2,85,594 6 4
Sundry Receipts	10	2,096 15 10
<i>Profit and Loss on Investments—</i>		
Net profit	90	8,701 2 0
TOTAL		9,87,403 10 1

Scholarships Fund up to the 31st December 1911.

EXPENDITURE.	Ledger Folio.	Amount.
<i>Investments—</i>		<i>R a. p.</i>
4% Calcutta Municipal Debentures of 1899-1900	16	25,000 0 0
4% Ditto ditto of 1897-98	81	15,000 0 0
4% Ditto ditto of 1903-04	83	12,000 0 0
4½% Rangoon Municipal Debentures of 1900	79	67,000 0 0
4% Calcutta Port Trust Debentures of 1895	17	5,000 0 0
4½% Rangoon Municipal Debentures of 1904	88	2,85,450 0 0
4% Madras Municipal Debentures of 1903	75	1,06,950 0 0
6% Loan to Ajudhia Estate, Court of Wards, United Provinces	98	1,00,000 0 0
		<hr/> 7,01,400 0 0
<i>Objects of Fund—</i>		
Grants-in-aid—		
Baluchistan	94	9,570 0 0
Baroda	68	7,226 0 0
Bengal	54	27,540 0 0
Berar	62	9,250 8 0
Bhopal	48	4,210 0 0
Burma	117	5,524 2 8
Central Provinces	44	8,717 0 0
Gorakhpur	46	2,350 0 0
Gwalior	50	35,000 0 0
Hathwa	56	15,000 0 0
Hyderabad	40	17,311 8 0
Indore	52	14,000 0 0
Junagadh	60	1,824 0 0
Kashmir	69	315 0 0
Mysore	42	6,500 0 0
Punjab	74	26,364 8 0
Rajputana	72	33,304 8 0
United Provinces	66	24,239 0 0
Miscellaneous	96	8,925 1 2
Profit and Loss	63	100 0 0
		<hr/> 2,61,771 3 10
<i>Expenses of Fund—</i>		
Permanent advances	57	100 0 0
Salaries, wages, and travelling expenses of Office Establishment	104	12,154 0 0
Office Contingencies, including postage, telegrams, etc.	105	4,193 14 2
Commission on investments, realizing interest, etc.	33	4,390 12 11
Office Building	100	1,570 0 0
		<hr/> 23,257 11 1
<i>Closing balance on 31st December 1911</i>		<hr/> 62 11 2
TOTAL		<hr/> 9,27,403 10 1

(Sd.) B. W. MARLOW, Colonel,
Honorary Treasurer.

Investment Account of the Victoria Memorial Scholarships Fund.

	Nominal Value.		Cost.	
	R	a. p.	R	a. p.
4 % Calcutta Municipal Debentures of 1899-1900.	25,000	0 0	25,000	0 0
4 % Ditto of 1897-98	15,000	0 0	15,000	0 0
4 % Ditto of 1903-04	12,000	0 0	12,090	0 0
4 % Calcutta Port Trust Debentures of 1895	5,000	0 0	5,000	0 0
4 % Madras Municipal Debentures of 1903	1,95,000	0 0	1,96,950	0 0
4½ % Rangoon Municipal Debentures of 1900	62,000	0 0	62,000	0 0
4½ % Rangoon Municipal Debentures of 1904	2,59,500	0 0	2,85,450	0 0
Loan at 6 % per annum to Ajudhia Estate, United Provinces, Court of Wards	1,00,000	0 0	1,00,000	0 0
TOTAL	6,73,500	0 0	7,01,490	0 0

CALCUTTA ;

The 1st March 1912.

(Sd.) B. W. MARLOW, Colonel,

Honorary Treasurer.

CALCUTTA
SUPERINTENDENT GOVERNMENT PRINTING, INDIA
8, HASTINGS STREET